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Date: August 14, 2001

Initial: CM Jensen

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Comments: _____

STATE OF MICHIGAN



NATURAL RESOURCES COMMISSION

THOMAS J. ANDERSON
MARLENE J. FLUHARTY
GORDON E. GUYER
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JAMES J. BLANCHARD, Governor

DEPARTMENT OF NATURAL RESOURCES

STEVENS T. MASON BUILDING
P.O. BOX 30028
LANSING, MI 48909

DAVID F. HALES, Director

RECEIVED
SEP 20 1989

OFFICE OF RCRA
WASTE MANAGEMENT DIVISION
EPA, REGION V

September 15, 1989

CERTIFIED MAIL

Mr. Charles U. Guy, Manager
Environmental Compliance
Corporate Risk Management Department
Detrex Corporation
1100 North State Road
Ashtabula, Ohio 44004

Dear Mr. Guy:

SUBJECT: Notice of Violation and Proposed Consent Order
Detrex Corporation
MID 020 906 764

Enclosed please find a Notice of Violation and a proposed Consent Order. The Notice of Violation states the specific requirements of the Michigan Hazardous Waste Management Act, 1979 P.A. 64, as amended (Act 64), MCL 299.501 et seq., and the rules promulgated under this statute, which the Department of Natural Resources (Department) alleges has been violated by the Detrex Corporation. Specifically, the Department is alleging that Detrex Corporation has failed to submit a complete operating license application. The Consent Order is proposed as a means of resolving these violations.

You are offered an opportunity to confer with the staff of the Department regarding the Notice of Violation and proposed Consent Order, on September 28, 1989, at 10:30 a.m. in Conference Room A, First Floor, South Ottawa Building, Lansing, Michigan. Any documentation of compliance with the requirements specified in the Notice should be brought to the conference.

You may submit a written response to the Notice of Violation and proposed Consent Order at any time prior to, during, or in lieu of, the conference. The written response should state whether representatives of Detrex Corporation are planning to attend the conference or if the submittal is being made in lieu of the conference. If the violations alleged in the Notice of Violation are not resolved by entry of a Consent Order or otherwise by October 2, 1989, the Department may initiate proceedings to deny the operating license application and terminate Detrex Corporation's interim status.

Mr. Charles U. Guy
MID 020 906 764
Page 2
September 15, 1989

This matter has been assigned to Ms. Daria Devantier, Compliance and Enforcement Section, Waste Management Division. Please contact her at 517-335-4694, if you have any questions.

Sincerely,



Alan J. Howard, Chief
Waste Management Division
517-373-9523

Attachments

cc: Ms. Laura Lodisio, U.S. EPA
Ms. Marilyn Sabadaszka, U.S. EPA
Mr. Rich Traub, U.S. EPA
Mr. Stewart Freeman, AG
Ms. Daria Devantier, DNR
Mr. Stephen Buda, DNR/O.L. File
Ms. Ronda L. Hall, DNR
Mr. Dale DeKraker, DNR-Grand Rapids

STATE OF MICHIGAN
DEPARTMENT OF NATURAL RESOURCES
WASTE MANAGEMENT DIVISION

In the matter of administrative
proceedings against Detrex Corporation,
a corporation organized under the laws of
the State of Michigan and doing business
at 312 Ellsworth Avenue, S.W., City of
Grand Rapids, County of Kent, Michigan
49503
EPA ID No. MID 020 906 764 -

NOTICE OF VIOLATION

You are hereby notified that the Staff of the Department of Natural Resources ("DNR") has sufficient information to believe that Detrex Corporation ("Detrex") has violated the requirements of the Michigan Hazardous Waste Management Act, 1979 P.A. 64, as amended, ("Act 64") MCL 299.501 et seq.; MSA 13.30 (1) et seq., and the rules promulgated thereunder.

Regulatory Background

1. Pursuant to its authority under Act 64, the DNR has promulgated administrative rules pertinent to the identification, generation, treatment, storage, disposal, and transportation of hazardous wastes in Michigan. The most recent version of these rules can be found in the Michigan Administrative Code, R 299.9101 to R 299.11107.
2. The U.S. Environmental Protection Agency ("U.S. EPA") first published rules concerning the identification, generation, transportation, treatment, storage, or disposal of hazardous wastes on May 19, 1980. These rules are codified at 40 CFR Parts 260 through 265. Notification to U.S. EPA of hazardous waste activity was required in most instances no later than August 18, 1980.
3. Section 3010(a) of the Resource Conservation and Recovery Act ("RCRA"), 42 U.S.C. §6930(a), requires any person who generates or transports hazardous waste, or owns or operates a facility for the treatment, storage, or disposal of hazardous waste, to notify U.S. EPA of such activity within 90 days of the promulgation of rules under Section 3001 of RCRA. Section 3010 of RCRA also provides that no hazardous waste subject to the rules may be transported, treated, stored, or disposed of unless the required notification has been given.
4. On October 30, 1986, the State of Michigan was granted final authorization by the Administrator of the U.S. EPA, pursuant to Section 3006(b) of RCRA, 42 U.S.C. §6926(b), to administer a hazardous waste program in Michigan in lieu of the federal program, 40 CFR Part 271; 51 Federal Register 36804 (October 16, 1986). Section 3008 of RCRA, 42

U.S.C. §6928, provides that the U.S. EPA may enforce state rules in those states authorized to administer a hazardous waste program.

Factual Statement

5. Detrex is a person as defined by Section 5(2) of Act 64, and R 299.9106(g). Detrex owns and operates a facility at 312 Ellsworth Avenue, S.W., Grand Rapids, Michigan, that stores hazardous waste, (the "storage facility"). The Company is a Michigan corporation authorized to do business in Michigan.

6. On November 14, 1980, Detrex filed a notification of hazardous waste activity for the storage facility with U.S. EPA pursuant to Section 3010 of RCRA. The Company's EPA I.D. No. is MID 020 906 764.

7. Rule 299.9502(1)(3-5) states in pertinent part:

"(1) A person shall not conduct, manage, maintain, or operate a treatment, storage, or disposal facility without an operating license from the director, except for those facilities identified in subrules (3), (4), and (5) of this rule . . .

(3) An owner or operator of a storage facility in existence on March 30, 1983, which is subject to the licensing requirements of the act solely due to the 1982 amendments to the act may continue to operate until such time as the director acts upon the facility's application for an operating license, if all of the following conditions are met:

(a) The facility complies with subrule 2(b) of this rule.

(b) The owner or operator submits a complete operating license application within 180 days after being requested to do so by the director.

(c) The owner or operator complies with the applicable requirements of parts 6 and 7 of these rules and all applicable environmental statutes.

(4) The owner or operator of a treatment, storage, or disposal facility in existence on the effective date of amendments to the act or these rules that render the facility subject to the licensing requirements of the act, may continue to operate until such time as the director acts upon the owner or operator's application for an operating license, provided the conditions of subrule (3)(a), (b) and (c) of this rule are met.

(5) An owner or operator of a facility in existence on January 1, 1980, which is subject to the licensing requirements of the act, but which has not yet obtained an operating license under the act, may continue to operate until such time as the director acts upon the facility's application for an operating license, if the owner or operator meets the conditions of subrule (3)(a), (b), and (c) of this rule."

8. R 299.9510(1-3) states:

"(1) Any person who requires an operating license under the act shall complete, sign, and submit, to the director, an application for each license required under R 299.9502, as described in this rule. Persons with interim status currently authorized to operate without a license as provided by R 299.9502 shall apply for operating licenses when required by the director. Procedures for applications, issuance and administration of emergency operating licenses, and research licenses are found exclusively in R 299.9501.

(2) All applicants for operating licenses shall provide the information set forth in R 299.9508 to the director and shall use the application form provided by the director.

(3) The director, or his or her designee, shall not begin the processing of an operating license application until it is complete, except for emergency operating licenses under R 299.9501. An application for an operating license is complete when the director receives an application which includes that information required by R 299.9508. The completeness of any application for an operating license shall be judged independently of the status of any other permit or permit application for the same facility."

9. On May 6, 1988, the Director of the DNR mailed an operating license call-in letter, which required the submission of a complete operating license application for the Company's Grand Rapids hazardous waste storage facility within 180 days of the date of the letter. The letter also included a description of the information required for a complete application and the citations of applicable regulations.

10. On November 10, 1988, the Company submitted an operating license application for the Company's Grand Rapids storage facility.

11. On April 18, 1989, the Chief of the WMD, mailed the Company a Notice of Deficiency/Letter of Warning (NOD/LOW) which stated that the operating license was not complete and listed the following specific deficiencies in the application:

- a. "The operating license application form must be signed by the titleholder of land on which the facility is constructed. The signatory must be a responsible corporate officer, or a duly authorized representative, in accordance with 40 CFR §270.11. A certification statement from the titleholder of the land must also be included in the application in accordance with 40 CFR §270.11(d)."
- b. "The operating license application must provide proof of issuance of all State environmental permits."

- c. "The operating license application must provide written proof of arrangements with the local authorities in accordance with 40 CFR §264.37."
- d. "The contingency plan must provide a physical description of all emergency equipment, and a brief outline of each item's capabilities as required by 40 CFR §264.52(e)."
- e. "The operating license application must provide the traffic information required by 40 CFR §270.14(b)(10)."
- f. "The topographic map must clearly show the legal boundaries of the hazardous waste management facility site."
- g. "The operating license application must contain a hydrogeological report that meets the requirements of R 299.9506. The facility does not meet the requirements for a waiver of the hydrogeological report as specified in R 299.9508(2)."
- h. "The operating license application must contain a groundwater monitoring plan in accordance with R 299.9611(2)(a). The facility does not meet the requirements for a groundwater monitoring waiver as specified in R 299.9611(3)(a). A copy of the WMD "Sampling and Analysis Plan Outline" is attached for your assistance. The facility is not in compliance with R 299.9604(1)(c) which states that owners or operators of treatment, storage, or disposal facilities shall design, construct, operate, and maintain systems to prevent hazardous waste or hazardous waste constituents from escaping into the soil, directly or indirectly into surface water or groundwaters, or uncontrolled into drains or sewers. The design of the "secondary containment" system and integrity of the basement floors and walls do not provide adequate protection against potential releases."
- i. "The failure mode assessment must address leaks or spills of hazardous waste during transport and in the loading/unloading area."
- j. "Engineering plans of the container storage unit, the loading/unloading area, and all secondary containment structures must be included in the operating license application. The plans must be prepared and sealed by a registered professional engineer and must include the information specified in R 299.9504(1)(g)."
- k. "The secondary containment system for the container storage unit does not comply with the requirements with 40 CFR §264.175."

"The containers must be directly underlain by a base that is free of cracks or gaps and is sufficiently impervious to contain leaks, spills or accumulated precipitation. The base must be sloped or otherwise designed and operated to drain and remove liquids resulting from leaks, spills or precipitation, unless the containers are elevated or are otherwise protected from contact with accumulated liquid. The hardwood overlain by steel plating design is not adequate. A compliance schedule for upgrading the container storage unit must be included in the operating license application in accordance with Deficiency p."

"The operating license application must provide a drawing illustrating the rows in which the containers are stored and the aisle space maintained in the storage unit."

1. The operating license application must address the facility design and operating standards established in R 299.9604. If an exemption from the provisions of R 299.9604(1)(a) and (b) is desired, a justified request must be provided in the application in accordance with R 299.9604(2)."
- m. "The operating license application must specify the procedures implemented to ensure that the Act 64 manifesting, recordkeeping, and reporting requirements are followed."
- n. "The operating license application must contain a certification of the storage facility's capability for managing hazardous waste. The capability certification, prepared and sealed by a registered professional engineer, must be supplemented by the certification statement provided in 40 CFR §270.11(d) in accordance with 40 CFR §270.11(b)."
- o. "The Michigan financial test form or an alternate Michigan approved mechanism must be used to demonstrate financial assurance for closure/post-closure care and liability coverage. The federal form submitted with the operating license application is not adequate. A Michigan form is enclosed for your use."
- p. "The operating license application must provide a detailed description of the modifications necessary to bring the facility under compliance. The container storage secondary containment design must be upgraded in accordance with Deficiency j."

12. The NOD/LOW advised the Company that submission of an incomplete operating license application was a violation of Act 64 and Rule 299.9502(3)(b), and that failure to submit the deficient information by May 19, 1989, could subject the Company to civil fines pursuant to Section 48 of Act 64, termination of interim status and denial of the Company's operating license application.

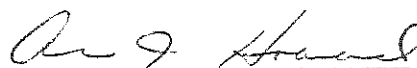
13. On April 24, 1989, the Company submitted a request for an extension of the revised operating license application submittal deadline from May 19, 1989, to June 19, 1989. On April 27, 1989, the Chief of the Hazardous Waste Permits Section, Waste Management Division, mailed the Company a letter approving the request.

14. The following information required was not received on or before June 19, 1989:

- a. An operating license application form signed by the titleholder of the land upon which the facility is located;
- b. A certification statement by the titleholder of the land upon which the facility is located;
- c. A financial assurance document that meets the requirements of R 299.9703;
- d. A liability coverage document that meets the requirements of R 299.9710.

Conclusion

The DNR has sufficient information to believe Detrex has violated Act 64 and the rules promulgated thereunder. A person who violates Act 64 or the rules promulgated thereunder is subject to state or federal civil and criminal sanctions. Accordingly, a failure on the part of Detrex to timely and adequately respond to the violations cited herein may result in the commencement of administrative or judicial proceedings against the Company, termination of interim status, and denial of the operating license application.


Alan J. Howard, Chief
Waste Management Division
517-373-9523

Dated: 9-15-89

STATE OF MICHIGAN
DEPARTMENT OF NATURAL RESOURCES
WASTE MANAGEMENT DIVISION

In the matter of administrative
proceedings against Detrex Corporation a
corporation organized under the laws of
the State of Michigan and doing business
at 312 Ellsworth Avenue, S.W., City of
Grand Rapids, County of Kent, State of
Michigan 49503
EPA I.D. No. MID 020 906 764-

WMD Order No. 64-_____

CONSENT ORDER

RE: INCOMPLETE OPERATING LICENSE APPLICATION

This proceeding results from allegations specified in a Notice of Violation (NOV) issued on September 15, 1989, by the Staff of the Department of Natural Resources ("DNR"). The DNR alleges that Detrex Corporation ("Detrex"), a Michigan corporation, doing business at 312 Ellsworth Avenue, S.W., City of Grand Rapids, County of Kent, Michigan, is in violation of the Michigan Hazardous Waste Management Act, 1979 P.A. 64, as amended ("Act 64"), MCL 299.501, et seq.; MSA 13.30(1) et seq., and rules promulgated thereunder. Detrex and the DNR agree to resolve the violations set forth in the NOV in this matter and to terminate this proceeding by entry of this Consent Order.

I. STIPULATIONS

Detrex and the DNR stipulate as follows:

1. Pursuant to its authority under Act 64, the DNR has promulgated administrative rules pertinent to the identification, generation, treatment, storage, disposal, and transportation of hazardous wastes in Michigan. These rules are set forth in the Michigan Administrative Code, R 299.9101 to R 299.11107.

2. On October 30, 1986, the State of Michigan was granted final authorization by the Administrator of the U.S. Environmental Protection Agency ("U.S. EPA"), pursuant to Section 3006(b), the Resource Conservation and Recovery Act ("RCRA") 42 U.S.C. §6926(b), to administer a hazardous waste program in Michigan in lieu of the federal program, 40 CFR Part 271, 51 Federal Register 36804 (October 16, 1986). Section 3008 of RCRA, 42 U.S.C. §6928, provides that the U.S. EPA may enforce state regulations in those states authorized to administer a hazardous waste program.

3. Detrex is a person as defined by Section 5(2) of Act 64 and R 299.9106(g). Detrex owns and operates a facility at 312 Ellsworth Avenue, S.W., Grand Rapids, Michigan, that stores hazardous waste (the "storage facility"). Detrex is a Michigan corporation authorized to do business in Michigan.

4. On November 14, 1980, Detrex filed a notification of hazardous waste activity for the storage facility with U.S. EPA pursuant to Section 3010 of RCRA. Detrex's EPA I.D. No. is MID 020 906 764.

5. The Director of the DNR is authorized by Section 48(1) of Act 64, to issue orders to comply. Accordingly, the Director has authority to issue and enter into this Order to comply by consent with Detrex.

6. Detrex stipulates to the issuance and entry of this Order to comply by consent and stipulates that the termination of this matter by a final order to be entered as a Consent Order is proper and acceptable. This Consent Order, thus, shall be considered a final order of the DNR and shall become effective on the date it is signed by its Director.

7. Detrex and the DNR agree that the signing of this Consent Order is for settlement purposes only and does not constitute an admission by Detrex that the law has been violated.

II. COMPLIANCE PROGRAM

8. Detrex shall complete the operating license application as required by Act 64 and its rules, in accordance with the following schedule:

- A. By November 1, 1989, Detrex shall submit an operating license application form signed by the titleholder of the land upon which the facility is located. The form shall be accompanied by proof that the signatory is the actual titleholder.
- B. By November 1, 1989, Detrex shall submit the certification statement required by R 299.9508(3) and 40 CFR §270.11 and signed by the titleholder of the land upon which the facility is located.
- C. By November 1, 1989, Detrex shall submit a financial assurance document that meets the requirements of R 299.9703.
- D. By November 1, 1989, Detrex shall submit a liability coverage document that meets the requirements of R 299.9710.

- E. For purposes of this order, the words "owner" and/or "titleholder" means all persons who hold a legal, equitable, or possessory interest of any kind in the property upon which the facility is located, including, but not limited to, a trust, vendor, vendee, lessor, or lessee. "Person" means an individual, partnership, joint venture, trust, firm, joint stock company, corporation, association, or any other legal entity.

III. FINES AND PENALTIES

9. Within 30 days of entry of this Order, Detrex shall pay to the General Fund of the State of Michigan, by check made payable to the State of Michigan and delivered to the Assistant Attorney General in Charge, Environmental Protection Division, Law Building, 525 W. Ottawa, Lansing, Michigan 48913, a civil fine in the sum of \$3,000.00. This sum is in addition to any fees, taxes, or other fines that may be imposed on Detrex by law.

10. For each failure to comply with any deadline specified in subparagraphs A to D of paragraph 8, Detrex shall pay \$500 per violation per day for one to seven days of delay, \$1,000 per violation per day for eight to fourteen days of delay, and \$2,500 per violation per day for each day of delay or part thereafter. Stipulated penalties shall be paid within thirty (30) days after written demand made by the DNR by check made payable to the State of Michigan and delivered to the Assistant Attorney General in Charge, Environmental Protection Division. Notwithstanding the assessment of any stipulated penalties, the DNR may initiate proceedings to deny Detrex's operating license and terminate Detrex's interim status for failure to meet the applicable deadlines specified in Section II above.

11. Detrex agrees not to contest the legality of the civil fine paid pursuant to paragraph 9 above. Detrex further agrees not to contest the legality of any stipulated penalties assessed pursuant to paragraph 10 above, but reserves the right to dispute the factual basis upon which a demand by DNR for stipulated penalties is made in a court of competent jurisdiction.

IV. GENERAL PROVISIONS

12. DNR reserves the right to pursue any other remedies to which they are entitled for any failure on the part of Detrex to comply with the requirements of Act 64, and its rules.

13. Notwithstanding any other provision of this Consent Order, an enforcement action may be brought by DNR pursuant to Act 64 or other statutory authority where the generation, storage, transportation, treatment, or disposal of hazardous waste at the Grand Rapids facility may present an imminent and substantial hazard to the health of persons or to the natural resources or is endangering or causing damage to the public health or the environment.

14. The DNR and Detrex consent to enforcement of this Order in the same manner and by the same procedures for all final orders entered pursuant to Act 64, MCL 299.501; MSA 13.30(1), and enforcement pursuant to 1970 P.A. 127, MCL 691.1201 et seq.; MSA 14.528(201) et seq.

15. This Order in no way affects Detrex's responsibility to comply with any other applicable state, federal, or local laws or regulations.

16. The provisions of this Order shall apply to and be binding upon the parties to this action, their officers, directors, agents, servants, employees, successors and assigns, and all persons, firms and corporations having notice of the Order. Detrex shall give notice of this Order to any prospective successor in interest prior to transfer of ownership and shall notify the DNR of such proposed sale or transfer.

V. TERMINATION

17. This Order shall terminate upon written confirmation by the Chief of the Waste Management Division that the operating license is administratively complete.

SIGNATORIES

The undersigned CERTIFY they are fully authorized by the party they represent to enter into this Order to comply by consent and to EXECUTE and LEGALLY BIND that party to it.

DEPARTMENT OF NATURAL RESOURCES

By: _____

Title: _____

Date: _____

By: _____

Title: Director

Date: _____

DEPARTMENT OF ATTORNEY GENERAL

Frank J. Kelley
Attorney General

Stewart H. Freeman
Assistant Attorney General
In Charge
Environmental Protection Division
720 Law Building
Lansing, Michigan 48913

Date: _____

EPA

STATE OF MICHIGAN



NATURAL RESOURCES COMMISSION
THOMAS J. ANDERSON
MARLENE J. FLUHARTY
KERRY KAMMER
O. STEWART MYERS
DAVID D. OLSON
RAYMOND POUPORE

JAMES J. BLANCHARD, Governor

DEPARTMENT OF NATURAL RESOURCES

David F. Hales, Director
State Office Building
350 Ottawa, N.W.
Grand Rapids, MI 49503
Phone: 616-456-5071

June 14, 1988

Ms. Sharon Burns
Gold Shield Solvents
312 Ellsworth, S.W.
Grand Rapids, MI 49503

RE: MID 020906764

Dear Ms. Burns:

On June 13, 1988, staff of the Department of Natural Resources conducted an investigation of your facility located at 312 Ellsworth, Grand Rapids, Michigan to evaluate compliance of that facility with requirements of Subtitle C of the Resource Conservation and Recovery Act (RCRA), as amended, and with Michigan Act 64, P.A. of 1979. A copy of the completed inspection form is enclosed.

As a result of the investigation, staff of the Department of Natural Resources determined that the above facility is in violation of the requirements of Subtitle C of RCRA and Act 64. Specifically, staff found that the following requirement(s) were not being met:

1. An annual review of personnel training had not been conducted as required by 40 CFR, Part 265.16 of RCRA.

We request that you respond to this letter by June 22, 1988, providing documentation to this office regarding those actions being taken to correct the above stated violations and correction of same violations prior to July 13, 1988. The DNR will evaluate your response and determine our facility's compliance status.

If you have any questions, feel free to contact me and address your response to the address on this letter.

Sincerely,

Dale M. DeKraker

Dale M. DeKraker
Environmental Quality Analyst
Waste Management Division

DMD/bls

Enclosure

STATE OF MICHIGAN



NATURAL RESOURCES COMMISSION
THOMAS J. ANDERSON
MARLENE J. FLUHARTY
GORDON E. GUYER
KERRY KAMMER
O. STEWART MYERS
DAVID D. OLSON
RAYMOND POUPORE

JAMES J. BLANCHARD, Governor

DEPARTMENT OF NATURAL RESOURCES

RONALD O. SKOOG, Director

State Office Building
350 Ottawa, N. W.
Grand Rapids, MI 49503
Phone: 616-456-5071
July 14, 1986

Ms. Sharon Burns
Detrex Chemical Industries
Gold Shield Solvent Division
312 Ellsworth, S. W.
Grand Rapids, MI 49503

RE: MID 020906764

Dear Ms. Burns:

On July 11, 1986, staff of the Department of Natural Resources conducted an investigation as an agent of U.S. EPA of your facility located at 312 Ellsworth, Grand Rapids, Michigan to evaluate compliance of that facility with requirements of Subtitle C of the Resource Conservation and Recovery Act (RCRA), as amended. A copy of the completed RCRA inspection form is enclosed.

As a result of the investigation, staff of the Department of Natural Resources determined that the above facility is in violation of the requirements of Subtitle C of RCRA. Specifically, staff found that the following requirement was not being met:

A copy of Manifest #MI0823982 dated February 20, 1986, has not been received from the disposal facility within 45 days of shipment and your company has not initiated follow-up activity nor notified EPA as required by 40 CFR, Part 262.42 of RCRA.

We request that you respond to this letter by July 25, 1986, providing documentation to this office regarding those actions being taken to correct the above stated violations and correction of same violations prior to August 10, 1986. The DNR will evaluate your response and forward a copy of the response to the U.S. EPA along with a recommendation on your facility's compliance status.

If you have any questions, feel free to contact me and address your response to the address on this letter.

Sincerely,

A handwritten signature in cursive script that reads "Dale M. DeKraker".

Dale M. DeKraker
Environmental Quality Analyst
Hazardous Waste Division

DMD/mn
cc: M. Murphy, U.S. EPA, Region V (w/enc.)
Enclosure

STATE OF MICHIGAN



NATURAL RESOURCES COMMISSION

THOMAS J. ANDERSON
E. R. CAROLLO
MARLENE J. FLUHARTY
STEPHEN F. MONSMA
O. STEWART MYERS
RAYMOND POUPORE
HARRY H. WHITELEY

JAMES J. BLANCHARD, Governor

DEPARTMENT OF NATURAL RESOURCES

RONALD O. SKOOG, Director

State Office Building
350 Ottawa, N. W.
Grand Rapids, MI 49503
Phone: 456-5071
October 25, 1985

Mr. W. G. Robrecht
Detrex Chemical Industries, Inc.
P. O. Box 501
Detroit, MI 48232

RE: MID 020906764

Dear Mr. Robrecht:

This correspondence is written to acknowledge receipt of your letter dated October 21, 1985, which itemizes actions taken by the company to correct deficiencies noted during the RCRA inspection on October 4, 1985.

Therefore, this is to notify you that at this time the company has corrected the violation(s) identified in the compliance letter of October 9, 1985, with regard to the Resource Conservation and Recovery Act.

Sincerely,

A handwritten signature in dark ink, appearing to read "Dale M. DeKraker".

Dale M. DeKraker
Water Quality Specialist
Hazardous Waste Division

DMD/mn

cc: M. Murphy, U.S. EPA Region V
Jim Harrison
Gold Shield Solvents
312 Ellsworth, SW
Grand Rapids, MI 49503

DETREX CHEMICAL INDUSTRIES, INC.



P.O. BOX 501, DETROIT, MICHIGAN 48232

TWX 810-224-4756

TELEPHONE
(313) 358-5800

October 21, 1985

RECEIVED

OCT 23 1985

HAZARDOUS WASTE DIVISION

Mr. Ronald C. Waybrant
District Supervisor
Hazardous Waste Division
Michigan DNR
State Office Building
350 Ottawa, N.W.
Grand Rapids, MI 49503

Re: MID 020906764

Your Letter to J. Harrison & Mike Tepatti 10/9/85

Dear Mr. Waybrant:

We regret that a copy of our latest Closure Cost Estimate was not available at the site during the inspection of October 4, 1985.

Our closure cost estimates are routinely updated in January for all of our facilities in preparation for submittal of our annual RCRA financial data.

Enclosed is a copy of the most recent Closure Cost Estimate, dated 1/3/85, for the Grand Rapids facility.

Should you need any additional information, please advise.

Very truly yours,

W. G. Robrecht
Manager of Corporate Engineering

/smb

Encl.

cc: J. Harrison
M. Tepatti

X6 EPA - REGION 7, MARY MURPHY

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RCRA Inspection Report

EPA Identification Number: M I D 0 2 0 9 0 6 7 6 4

Installation Name: DETREX CHEMICAL INDUSTRIES

Location Address: GOLD SHIELD SOLVENTS DIVISION
312 ELLSWORTH

City: GRAND RAPIDS State: MICHIGAN

Date of inspection: 10/4/85 Time of inspection (from) 9:30AM (to) 11:00AM

Person(s) interviewed

Title

Telephone

Mr Jim HARRISON

BRANCH MANAGER

454 - 9269 (616)

Mr Mike TEPATI

11 11

454-9269 (6/6)

Inspector(s)
DALE DE KRAKER

Agency/Title
MICHIGAN DNR

Telephone
456-5071 (616)

Installation Activity (mark only one box)

Inspection Form(s)

☒ Treatment/Storage/Disposal per 40 CFR 265.1 and/or
Generation and/or Transportation

A

TT Treatment/Storage/Disposal (no generation or Transportation)

A

II Generation and Transportation

B, C

II Generation only

B

II Transportation only

C

INSPECTION FORM A

Section A: SCOPE OF INSPECTION.

- Interim status standards for treatment storage or disposal of HAZARDOUS WASTES SUBJECT TO 40 CFR 265.1. Complete Inspection Form A sections B, C, D, E, and G.
- Place an "X" in the box(es) corresponding to the facility's treatment, storage and disposal processes, and generation and/or transportation activity (if any). Complete only the applicable sections and appendixes.

Permit application process(es) (EPA Form 3510-3) Inspection Form A section(s)

S01	<input checked="" type="checkbox"/>	storage in containers	(I)
S02	<input checked="" type="checkbox"/>	storage in tanks	(J)
T01	<input type="checkbox"/>	treatment in tanks	J
S04	<input type="checkbox"/>	storage in surface impoundment	K,F
T02	<input type="checkbox"/>	treatment in surface impoundment	K,F
D83	<input type="checkbox"/>	disposal in surface impoundment	K,F
S03	<input type="checkbox"/>	storage in waste pile	L
D81	<input type="checkbox"/>	disposal by land application	M,F
D80	<input type="checkbox"/>	disposal in landfill	N,F
T03	<input type="checkbox"/>	treatment by incineration	O/P
T04	<input type="checkbox"/>	treatment in devices other than tanks, surface impoundments, or incinerators	Q

Other activities

GENERATOR	<input checked="" type="checkbox"/>	APPENDIX	(GN)
TRANSPORTER	<input checked="" type="checkbox"/>	APPENDIX	(TR)

- Indicate any hazardous waste processes, by process code, which have been omitted from Part A of the facility's permit application.

NONE

- Indicate any hazardous waste processes (by process code and line number on EPA Form 3510-3 page 1 of 5) which appear to be eligible for exclusion per 40 CFR 265.1(c). Provide a brief rationale for the possible exclusion.

T04 CODE IS NOT APPLICABLE

Section B: GENERAL FACILITY STANDARDS: (Part 265 Subpart B)

	YES	NO	NI*	Remarks
1. Has the Regional Administrator been notified regarding: 265.12				
a. Receipt of hazardous waste from a foreign source?	___	___	<input checked="" type="checkbox"/>	<u>N/A</u>
b. Facility expansion?	___	___	<input checked="" type="checkbox"/>	<u>NO EXPANSIONS</u>
c. Change of owner or operator?	___	___	<input checked="" type="checkbox"/>	<u>NO CHANGES</u>
2. General Waste Analysis: 265.13				
a. Has the owner or operator obtained a detailed chemical and physical analysis of the waste?	<input checked="" type="checkbox"/>	___	___	<u>SPECIFIC GRAVIM G.C. SCAN</u>
b. Does the owner or operator have a detailed waste analysis plan on file at the facility?	<input checked="" type="checkbox"/>	___	___	<u>BASIC BUT ADEQUATE</u>
c. Does the waste analysis plan specify procedures for inspection and analysis of each movement of hazardous waste from off-site?	<input checked="" type="checkbox"/>	___	___	___
3. Security - Do security measures include: (if applicable) 265.14				
a. 24-Hour surveillance?	<input checked="" type="checkbox"/>	___	___	<u>ONE SHIFT OPERATION</u>
or				
b. i. Artificial or natural barrier around facility?	<input checked="" type="checkbox"/>	___	___	<u>LOCKED AT NIGHT</u>
and				
ii. Controlled entry?	<input checked="" type="checkbox"/>	___	___	___
c. Danger sign(s) at entrance?	<input checked="" type="checkbox"/>	___	___	___
4. Owner or operator inspections: 265.15				
a. Does the owner or operator inspect the facility for malfunctions, deterioration, operator errors, and discharges of hazardous waste that may affect human health or the environment?	<input checked="" type="checkbox"/>	___	___	___

*Not Inspected

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	YES	NO	NI	Remarks
b. Does the owner or operator have an inspection schedule at the facility?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. If so, does the schedule address the inspection of the following items:				
i. monitoring equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	N/A
ii. safety and emergency equipment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iii. security devices?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iv. operating and structural equipment (i.e. dikes, pumps, etc.)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
v. type of problems to be looked for during the inspection (e.g. leaky fitting, defective pump, etc.)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
vi. inspection frequency (based upon the possible deterioration rate of the equipment)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Are areas subject to spills inspected daily when in use?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Does the owner or operator maintain an inspection log or summary of owner or operator inspections?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Does the inspection log contain the following information:				
i. the date and time of the inspection?	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO TIMES
ii. the name of the inspector?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iii. a notation of the observations made?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iv. the date and nature of any repairs or remedial actions?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Do personnel training records include: 265.16				
a. Job titles?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Job descriptions?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

	YES	NO	NI	Remarks
c. Description of training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>TRAINED IN CONTINGENCY PLAN</u>
d. Records of training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Did facility personnel receive the required training by 5-19-81?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
f. Do new personnel receive required training within six months?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
g. Do personnel training records indicate that personnel have taken part in an annual review of initial training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>9/9/85</u>
6. If required, are the following special requirements for ignitable, reactive, or incompatible wastes addressed? 265.17				
a. Special handling?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>WASTES ARE NOT</u>
b. No smoking signs?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>IGNITABLE OR REACTIVE</u>
c. Separation and protection from ignition sources?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Section C: PREPAREDNESS AND PREVENTION: (Part 265 Subpart C)

1. Maintenance and Operation
of Facility: 265.31

Is there any evidence of fire,
explosion, or release of
hazardous waste or hazardous
waste constituent?

YES NO NI Remarks

___ ✓ ___

2. If required, does the facility
have the following equipment: 265.32

a. Internal communications or
alarm systems?

✓ ___ INTERCOM

b. Telephone or 2-way radios
at the scene of operations?

✓ ___

c. Portable fire extinguishers,
fire control, spill control
equipment and decontamination
equipment?

✓ ___

Indicate the volume of water and/or foam available for fire control:

CITY WATER

3. Testing and Maintenance of
Emergency Equipment: 265.33

a. Has the owner or operator
established testing and
maintenance procedures
for emergency equipment?

✓ ___ CONTRACTED OUT ON
A QUARTERLY BASIS

b. Is emergency equipment
maintained in operable
condition?

✓ ___

4. Has owner or operator provided
immediate access to internal
alarms? (if needed) 265.34

✓ ___

5. Is there adequate aisle space
for unobstructed movement?

✓ ___

6. Has the owner or operator attempted
to make arrangements with local
authorities in case of an emergency
at the facility?

✓ ___ FIRE
DNR
POLICE

Section D: CONTINGENCY PLAN AND EMERGENCY PROCEDURES: (Part 265 Subpart D)

YES NO NI Remarks

1. Does the Contingency Plan contain the following information: 265.52

a. The actions facility personnel must take to comply with §265.51 and 265.56 in response to fires, explosions, or any unplanned release of hazardous waste? (If the owner has a Spill Prevention, Control, and Counter-measures (SPCC) Plan, he needs only to amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with the requirements of this Part (as applicable.)

✓

BUT COULD BE MORE DETAILED

b. Arrangements agreed by local police departments, fire departments hospitals, contractors, and State and local emergency response teams to coordinate emergency services pursuant to §265.37?

✓

c. Names, addresses, and phone numbers (office and home) of all persons qualified to act as emergency coordinators?

✓

d. A list of all emergency equipment at the facility which includes the location and physical description of each item on the list and a brief outline of its capabilities?

✓

e. An evacuation plan for facility personnel where there is a possibility that evacuation could be necessary? (This plan must describe signal(s) to be used to begin evacuation, evacuation routes, and alternate evacuation routes?)

✓

NOT REQUIRED

2. Are copies of the Contingency Plan available at the site and local emergency organizations? 265.53

✓

YES NO NI Remarks

3. Emergency Coordinator 265.55

- a. Is the facility Emergency Coordinator identified?
- b. Is coordinator familiar with all aspects of site operation and emergency procedures?
- c. Does the Emergency Coordinator have the authority to carry out the Contingency Plan?

✓	—	—	Mr HARRISON
✓	—	—	—
✓	—	—	—

4. Emergency Procedures 265.56

If an emergency situation has occurred at this facility, has the Emergency Coordinator followed the emergency procedures listed in 265.56?

—	—	✓	NONE HAS OCCURRED
---	---	---	-------------------

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YES NO

Notes

Remarks

** 1. Use of Manifest System	265.71
------------------------------	--------

- a. Does the facility follow the procedures listed in §265.71 for processing each manifest? (Particularly sending a copy of the signed manifest back to the generator within 30 days after delivery.)

- b. Are records of past shipments retained for 3 years?

** 2. Does the owner or operator meet requirements regarding manifest discrepancies? 265.72

RETURNED TO
GENERATOR

** Not applicable to owners or operators
of on-site facilities that do not
receive any waste from off-site sources.

3. Operating Record 265.73

- a. Does the owner or operator maintain an operating record as required in 265.73?



- b. Does the operating record contain the following information:

- i. The method(s) and date(s) of each waste's treatment, storage, or disposal as required in 40 CFR Part 265 Appendix I?



Drums

- ii. The location and quantity of each hazardous waste within the facility? (This information should be cross-referenced to specific manifest number, if waste was accompanied by by a manifest.)

***iii. A map or diagram of each cell or disposal area

*** only applies to disposal facilities

11

4/82-A

YES NO NI Remarks

showing the location and quantity of each hazardous waste? (This information should be cross-referenced to specific manifest number, if waste was accompanied by a manifest.)

___ ___ ☒

iv. Records and results of all waste analyses, trial tests, monitoring data, and operator inspections?

☒ ___ ___

v. Reports detailing all incidents that required implementation of the Contingency Plan?

___ ___ ☒

NA

vi. All closure and post closure costs as applicable?

☒ ___ ___

4. Availability of Records 265.74

Are all facility records required under 40 CFR Part 265 available for inspection?

☒ ___ ___

5.**Unmanifested Waste Reports 265.76

a. Has the facility accepted any hazardous waste from an off-site generator subject to 40 CFR 262.20 without a manifest or or shipping paper?

___ ☒ ___

b. If "a" is yes, provide the identity of the source of the waste and a description of the quantity, type, and date received for each unmanifested hazardous waste shipment.

** Not applicable to owners or operators of on-site facilities that do not receive any hazardous from off-site sources.

Section G -- CLOSURE AND POST CLOSURE (Part 5 Subpart G)

	YES	NO	NI	Remarks
1. Closure 265.112				
a. Is the facility closure plan available for inspection?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NEEDS TO BE UPDATED FOR 1985.
b. Does the plan identify:				
i. maximum extent unclosed during facility life?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NO PARTIAL CLOSURES
ii. maximum hazardous waste inventory?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iv. estimated year of closure?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	20094-D
v. schedule of closure activities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Has closure begun?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
* Post-Closure 265.118				
a. Is the post-closure plan available for inspection?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Does this plan contain:				
i. description of groundwater monitoring activities and frequencies?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ii. description of maintenance activities and frequencies for				
AA. integrity of cap, final cover, or containment structures, where applicable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BB. facility monitoring equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iii. name, address, and phone number of person or office to contact during post-closure care period?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Has the post-closure period begun?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Is the written post-closure cost estimate available? 265.144	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Applies only to disposal facilities.

Section I - USE AND MANGEMENT OF CONTAINERS (Part 265, Subpart I)

	YES	NO	NI	Remarks
1. Are containers in good condition? 265.171	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are containers compatible with waste in them? 265.172	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Are containers managed to prevent leaks? 265.173	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are containers stored closed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Are containers inspected weekly for leaks and defects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Are ignitable and reactive wastes stored at least 15 meters (50 feet) from the facility property line? (Indicate if waste is ignitable or reactive). 265.176	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	N/A
7. Are incompatible wastes stored in separate containers? (If not, the provisions of 40 CFR 265.17(b) apply). 265.177	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	"
8. Are containers of incompatible waste separated or protected from each other by physical barriers or sufficient distance?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	"

Section J - TANKS (Part 265, Subpart J)

YES NO NI Remarks

1. Are tanks used to store only those wastes which will not cause corrosion, leakage or premature failure of the tank? 265.192

✓
STEEL TANK - STILL BOTTOMS
2. Do uncovered tanks have at least 60 cm (2 feet) of free-board, or dikes or other containment structures?

✓
CONTAINED AND 2'
3. Do continuous feed systems have a waste-feed cutoff?

✓ BATCH
4. Are waste analyses done before the tanks are used to store a substantially different waste than before? 265.193

✓ ALWAYS THE SAME
5. Are required daily and weekly inspections done? 265.194

✓
6. Are reactive & ignitable wastes in tanks protected or rendered non-reactive or non-ignitable? 265.198
 Indicate if waste is ignitable or reactive. (If waste is rendered non-reactive or non-ignitable, see treatment requirements.)

✓ N/A
7. Are incompatible wastes stored in separate tanks? 265.199
 (If not, the provisions of 40 CFR 265.17(b) apply.)

✓ N/A
8. Has the owner or operator observed the National Fire Protection Associations buffer zone requirements for tanks containing ignitable or reactive wastes?

Tank capacity: _____ gallons

Tank diameter: _____ feet

Distance of tank from property line _____ feet

(See table 2 - 1 through 2 - 6 of NFPA's "Flammable and Combustible Liquids Code - 1977" to determine compliance.)

Section A: Scope

1. Complete this Appendix if the owner or operator of a TSD facility also generates hazardous waste that is subsequently shipped off-site for treatment, storage, or disposal.

Section B: MANIFEST REQUIREMENTS (Part 262, Subpart B)

	YES	NO	NI	Remarks
(1) Does the operator have copies of the manifest available for review? 262.40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(2) Examine manifests for shipments in past 6 months. Indicate approximate number of manifested shipments during that period. <u>7</u>				
(3) Do the manifest forms examined contain the following information: (If possible, make copies of, or record information from, manifest(s) that do not contain the critical elements). 262.21				
a. Manifest document number?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Name, mailing address, telephone number, and EPA ID number of Generator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Name and EPA ID Number of Transporter(s)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>VALEY CITY REFUSE</u>
d. Name, address, and EPA ID Number Designated permitted facility and alternate facility?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>PETRO CITY EM .</u> <u>GOLD SHIELD</u>
e. The description of the waste(s) (DOT shipping name, DOT hazard class, DOT identification number)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>ORM-A</u>
f. The total quantity of waste(s) and the type and number of containers loaded?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>BULK</u>
g. Required certification?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
h. Required signatures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(4) Reportable exceptions 262.42				
a. For manifests examined in (2) (except for shipments within the last 35 days), enter the number of manifests for which the generator has <u>NOT</u> received a signed copy from the designated facility within 35 days of the date of shipment. <u>0</u>				
b. For manifests indicated in (4a), enter the number for which the generator has submitted exception reports (40 CFR 262.42) to the Regional Administrator. <u>0</u>				

Section C: PRE-TRANSPORT REQUIREMENTS (Part 262, Subpart C)

	YES	NO	NI	Remarks
1. Is waste packaged in accordance with DOT regulations? (Required prior to movement of hazardous waste off-site) 262.30	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are waste packages marked and labeled in accordance with DOT regulations concerning hazardous waste materials? (Required for movement of hazardous waste off-site) 262.31 262.32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. If required, are placards available to transporters of hazardous waste? 262.33	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	HAS OWN
4. On-site accumulation of generated hazardous wastes. A HWMF may accumulate hazardous waste it generates either (A) in its storage facility [265.1(b)] or (B) in accordance with 40 CFR 262.34 [see 265.1(c)(7)]. Option B restricts all accumulation to tanks and containers. If the installation elects option A, check this box <input checked="" type="checkbox"/> and skip to Section D. If the installation elects option B, complete the following observations: See 40 CFR 262.34 January 11, 1982 Revision				
a. Is each container clearly marked with the start of accumulation date?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Have more than 90 days elapsed since the date inspected in (a)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Do wastes remain in accumulation tanks for more than 90 days?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Is each container and tank labeled or marked clearly with the words "Hazardous Waste"?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section D: - RECORDKEEPING AND REPORTING (Part 262, Subpart D)

	YES	NO	NI	Remarks
1. Are all test results and analyses needed for hazardous waste determinations retained for at least three years? 262.40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section E: - INTERNATIONAL SHIPMENTS (Part 262, Subpart E)

1. Has the installation imported or exported Hazardous Waste? 262.50	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(If answered Yes, complete the following as applicable.)				
a. Exporting Hazardous waste; has a generator:				

Appendix TR

Section A: SCOPE:

1. Complete this Appendix if the owner or operator transports hazardous waste subject to 40 CFR 263.10.
2. Does the transporter transport hazardous waste into the U.S. from abroad?
3. Does the transporter transport hazardous waste out from the U.S.?
4. Does the transporter mix hazardous waste of different DOT shipping descriptions by placing them into a single container?

YES NO NI Remarks

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Section B: MANIFEST SYSTEM AND RECORDKEEPING (Part 263, Subpart B)

1. Are copies of completed manifests available for review and retained for three years. 263.22
2. Estimate the number of manifests for shipments completed during the part 6 months.
3. Examine a representative number of manifests. Indicate number examined.
4. Did transporter properly sign and date the manifests examined?
5. Do any manifests indicate shipments delivered to other than the designated facility? 263.21
If (5) is "no," skip 6 and 7.
6. Do any manifests indicate shipments delivered to other than an alternate facility?
7. Are shipments delivered to alternate facilities only because emergency prevents delivery to the designated facility?

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	180
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	~40
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

STATE OF MICHIGAN



NATURAL RESOURCES COMMISSION

THOMAS J. ANDERSON
J. R. CAROLLO
MARLENE J. FLUHARTY
STEPHEN F. MONSMA
O. STEWART MYERS
RAYMOND POUPORE
HARRY H. WHITELEY

JAMES J. BLANCHARD, Governor

DEPARTMENT OF NATURAL RESOURCES

RONALD O. SKOOG, Director

State Office Building
350 Ottawa, N. W.
Grand Rapids, MI 49503
Phone: 456-5071
October 9, 1985

Mr. James Harrison
Mr. Mike Tepatti
Gold Shield Solvents
312 Ellsworth, S. W.
Grand Rapids, MI 49503

RE: MID 020906764

Dear Mr. Harrison and Mr. Teppatti:

On October 4, 1985, staff of the Department of Natural Resources conducted an investigation as an agent of U. S. EPA of your facility located at 312 Ellsworth, Grand Rapids, Michigan, to evaluate compliance of that facility with requirements of Subtitle C of the Resource Conservation and Recovery Act (RCRA), as amended. A copy of the completed RCRA inspection form is enclosed.

As a result of the investigation, staff of the Department of Natural Resources determined that the above facility is in violation of the requirements of Subtitle C of RCRA. Specifically, staff found that the following requirement was not being met:

- 1) The company's closure cost estimate has not been subject to annual update as required by 40 CFR, Part 265, Subpart H.

We request that you respond to this letter by October 18, 1985, providing documentation to this office regarding those actions being taken to correct the above stated violations and correction of same violations prior to November 1, 1985. The DNR will evaluate your response and forward a copy of the response to the U.S. EPA along with a recommendation on your facility's compliance status.

If you have any questions, feel free to contact Dale DeKraker and address your response to the address on this letter.

Sincerely,

Ronald C. Waybrant, Ph. D.
District Supervisor
Hazardous Waste Division

RCW/DMD/mn

cc: EPA Region V (w/enc.)

RCRA Inspection Report

PA Identification Number: MTD - 020906764

Installation Name: DETROIT CHEMICAL INDUSTRIES

Location Address: GOLD SHIELD SOLVENT DIVISION
512 ELMWORTH STREET

City: GRAND RAPIDS State: MICHIGAN

Date of inspection: 7-14-86 Time of inspection (from) 8:30 AM (to) 11:55 AM

Person(s) interviewed	Title	Telephone
<u>MS. SHARON BURNS</u>	<u>SECRETARY</u>	<u>616-454-9267</u>
_____	_____	_____
_____	_____	_____

Inspector(s)	Agency/Title	Telephone
<u>DALE DEKORSE</u>	<u>MICHIGAN DNR</u>	<u>616-456-3071</u>
_____	_____	_____

Installation Activity (mark only one box)

Inspection Form(s)

- | | |
|---|----------|
| <input checked="" type="checkbox"/> Treatment/Storage/Disposal per 40 CFR 265.1 and/or Generation and/or Transportation | <u>A</u> |
| <input type="checkbox"/> Treatment/Storage/Disposal (no generation or Transportation) | A |
| <input type="checkbox"/> Generation and Transportation | B, C |
| <input type="checkbox"/> Generation only | B |
| <input type="checkbox"/> Transportation only | C |

INSPECTION FORM A

Section A: SCOPE OF INSPECTION.

1. Interim status standards for treatment storage or disposal of HAZARDOUS WASTES SUBJECT TO 40 CFR 265.1. Complete Inspection Form A sections B, C, D, E, and G.
2. Place an "X" in the box(es) corresponding to the facility's treatment, storage and disposal processes, and generation and/or transportation activity (if any). Complete only the applicable sections and appendixes.

Permit application process(es) (EPA Form 3510-3) Inspection Form A section(s)

S01	<input checked="" type="checkbox"/>	storage in containers	I
S02	<input checked="" type="checkbox"/>	storage in tanks	J
T01	<input type="checkbox"/>	treatment in tanks	J
S04	<input type="checkbox"/>	storage in surface impoundment	K,F
T02	<input type="checkbox"/>	treatment in surface impoundment	K,F
D83	<input type="checkbox"/>	disposal in surface impoundment	K,F
S03	<input type="checkbox"/>	storage in waste pile	L
D81	<input type="checkbox"/>	disposal by land application	M,F
D80	<input type="checkbox"/>	disposal in landfill	N,F
T03	<input type="checkbox"/>	treatment by incineration	O/P
T04	<input type="checkbox"/>	treatment in devices other than tanks, surface impoundments, or incinerators	Q

Other activities

GENERATOR	<input checked="" type="checkbox"/>	APPENDIX	GN
TRANSPORTER	<input checked="" type="checkbox"/>	APPENDIX	TR

3. Indicate any hazardous waste processes, by process code, which have been omitted from Part A of the facility's permit application.

NONE

4. Indicate any hazardous waste processes (by process code and line number on EPA Form 3510-3 page 1 of 5) which appear to be eligible for exclusion per 40 CFR 265.1(c). Provide a brief rationale for the possible exclusion.

T04 IS EXCLUDED

Section B: GENERAL FACILITY STANDARDS: (Part 265 Subpart B)

	YES	NO	NI*	Remarks
the Regional Administrator notified regarding: 265.12				
Receipt of hazardous waste from a foreign source?	<u> </u>	<u> </u>	<u>✓</u>	<u>N/A</u>
Facility expansion?	<u> </u>	<u> </u>	<u>✓</u>	<u>N/A</u>
Change of owner or operator?	<u> </u>	<u> </u>	<u>✓</u>	<u>N/A</u>
General Waste Analysis: 265.13				
a. Has the owner or operator obtained a detailed chemical and physical analysis of the waste?	<u>✓</u>	<u> </u>	<u> </u>	<u>39511 ANALYSIS FOR</u> <u>SOLVENT CONTENT SPECIFIC</u> <u>TOTAL WEIGHT 6/2/77</u>
b. Does the owner or operator have a detailed waste analysis plan on file at the facility?	<u>✓</u>	<u> </u>	<u> </u>	<u>BASED AS NOT DONE</u>
c. Does the waste analysis plan specify procedures for inspection and analysis of each movement of hazardous waste from off-site?	<u>✓</u>	<u> </u>	<u> </u>	<u>EACH SAMPLE</u>
3. Security - Do security measures include: (if applicable) 265.14				
a. 24-Hour surveillance? or	<u> </u>	<u> </u>	<u>✓</u>	<u>ONE SHIFT OPERATION</u>
b. i. Artificial or natural barrier around facility? and	<u>✓</u>	<u> </u>	<u> </u>	<u>PERMIT TO ENTER DOOR</u> <u>OFF-HOURS</u>
ii. Controlled entry?	<u>✓</u>	<u> </u>	<u> </u>	<u>SECURITY DOOR</u>
c. Danger sign(s) at entrance?	<u>✓</u>	<u> </u>	<u> </u>	<u> </u>
4. Owner or operator inspections: 265.15				
a. Does the owner or operator inspect the facility for malfunctions, deterioration, operator errors, and discharges of hazardous waste that may affect human health or the environment?	<u>✓</u>	<u> </u>	<u> </u>	<u> </u>

*Not Inspected

YES NO NI Remarks

- b. Does the owner or operator have an inspection schedule at the facility?
- c. If so, does the schedule address the inspection of the following items:
- i. monitoring equipment?
 - ii. safety and emergency equipment?
 - iii. security devices?
 - iv. operating and structural equipment (i.e. dikes, pumps, etc.)?
 - v. type of problems to be looked for during the inspection (e.g. leaky fitting, defective pump, etc.)?
 - vi. inspection frequency (based upon the possible deterioration rate of the equipment)?
- d. Are areas subject to spills inspected daily when in use?
- e. Does the owner or operator maintain an inspection log or summary of owner or operator inspections?
- f. Does the inspection log contain the following information:
- i. the date and time of the inspection?
 - ii. the name of the inspector?
 - iii. a notation of the observations made?
 - iv. the date and nature of any repairs or remedial actions?

YES	NO	NI	Remarks
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	n/a
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DAILY, WEEKLY
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

5. Do personnel training records include: 265.16

- a. Job titles?
- b. Job descriptions?

	YES	NO	NI	Remarks
c. Description of training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	"RIGHT TO KNOW" & OTHER APPLICABLE COURSES
d. Records of training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Did facility personnel receive the required training by 5-19-81?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
f. Do new personnel receive required training within six months?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
g. Do personnel training records indicate that personnel have taken part in an annual review of initial training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	12/5/86
6. If required, are the following special requirements for ignitable, reactive, or incompatible wastes addressed? 265.17				
a. Special handling?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	N/A
b. No smoking signs?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
c. Separation and protection from ignition sources?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Section C: PREPAREDNESS AND PREVENTION: (Part 265 Subpart C)

1. Maintenance and Operation
of Facility: 265.31

YES NO NI Remarks

Is there any evidence of fire,
explosion, or release of
hazardous waste or hazardous
waste constituent?

___ ✓ ___

NOT RECENT - HAZARDOUS
COSES ARE POSSIBLE AND
ARE UNDER INVESTIGATION

2. If required, does the facility
have the following equipment: 265.32

a. Internal communications or
alarm systems?

✓ ___ ___

PA SYSTEM
VOICE COMMUNICATION

b. Telephone or 2-way radios
at the scene of operations?

✓ ___ ___

PHONES

c. Portable fire extinguishers,
fire control, spill control
equipment and decontamination
equipment?

✓ ___ ___

Indicate the volume of water and/or foam available for fire control:

GAL WATER AVAILABLE

3. Testing and Maintenance of
Emergency Equipment: 265.33

a. Has the owner or operator
established testing and
maintenance procedures
for emergency equipment?

✓ ___ ___

WORKING IN COMPLIANCE
WITH REGULATIONS

b. Is emergency equipment
maintained in operable
condition?

✓ ___ ___

4. Has owner or operator provided
immediate access to internal
alarms? (if needed) 265.34

✓ ___ ___

5. Is there adequate aisle space
for unobstructed movement?

✓ ___ ___

MARQUETTE HOSPITAL

6. Has the owner or operator attempted
to make arrangements with local
authorities in case of an emergency
at the facility?

✓ ___ ___

GOOD COMMUNICATION

Section D: CONTINGENCY PLAN AND EMERGENCY PROCEDURES: (Part 265 Subpart D)

YES NO NI Remarks

1. Does the Contingency Plan contain the following information: 265.52

a. The actions facility personnel must take to comply with §265.51 and 265.56 in response to fires, explosions, or any unplanned release of hazardous waste? (If the owner has a Spill Prevention, Control, and Counter-measures (SPCC) Plan, he needs only to amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with the requirements of this Part (as applicable.)

✓

WELL DOCUMENTED
ACTIONS

b. Arrangements agreed by local police departments, fire departments hospitals, contractors, and State and local emergency response teams to coordinate emergency services pursuant to §265.37?

✓

c. Names, addresses, and phone numbers (office and home) of all persons qualified to act as emergency coordinators?

✓

d. A list of all emergency equipment at the facility which includes the location and physical description of each item on the list and a brief outline of its capabilities?

✓

e. An evacuation plan for facility personnel where there is a possibility that evacuation could be necessary? (This plan must describe signal(s) to be used to begin evacuation, evacuation routes, and alternate evacuation routes?)

✓

2. Are copies of the Contingency Plan available at the site and local emergency organizations? 265.53

✓

YES NO NI Remarks

3. Emergency Coordinator 265.55

a. Is the facility Emergency Coordinator identified?

✓ MS. RUPES

b. Is coordinator familiar with all aspects of site operation and emergency procedures?

✓

c. Does the Emergency Coordinator have the authority to carry out the Contingency Plan?

✓

4. Emergency Procedures 265.56

If an emergency situation has occurred at this facility, has the Emergency Coordinator followed the emergency procedures listed in 265.56?

 ✓ NO EMERGENCY HAS EVER OCCURRED.

E: MANIFEST SYSTEM, RECORDKEEPING, AND REPORTING: (Part 265 Subpart E)

YES NO NI Remarks

Manifest System 265.71

Does the facility follow the procedures listed in §265.71 for processing each manifest? (Particularly sending a copy of the signed manifest back to the generator within 30 days after delivery.)

✓ — —

b. Are records of past shipments retained for 3 years?

✓ — —

Does the owner or operator meet requirements regarding manifest discrepancies? 265.72

✓ — —

DISCREPANCIES ARE
RARE

** Not applicable to owners or operators of on-site facilities that do not receive any waste from off-site sources.

3. Operating Record 265.73

a. Does the owner or operator maintain an operating record as required in 265.73?

✓ — —

WASTE RECEIVING AND

b. Does the operating record contain the following information:

DISPATCH LOG

i. The method(s) and date(s) of each waste's treatment, storage, or disposal as required in 40 CFR Part 265 Appendix I?

✓ — —

ii. The location and quantity of each hazardous waste within the facility? (This information should be cross-referenced to specific manifest number, if waste was accompanied by a manifest.)

— — ✓

***iii. A map or diagram of each cell or disposal area

*** only applies to disposal facilities

E-1

4/82-A

YES NO NI Remarks

showing the location and quantity of each hazardous waste? (This information should be cross-referenced to specific manifest number, if waste was accompanied by a manifest.)

___ ___ ☒

iv. Records and results of all waste analyses, trial tests, monitoring data, and operator inspections?

☒ ___ ___

v. Reports detailing all incidents that required implementation of the Contingency Plan?

___ ___ ☒

NOVA CC EST IF
REQUIRED

vi. All closure and post closure costs as applicable?

☒ ___ ___

4. Availability of Records 265.74

Are all facility records required under 40 CFR Part 265 available for inspection?

☒ ___ ___

5.**Unmanifested Waste Reports 265.76

a. Has the facility accepted any hazardous waste from an off-site generator subject to 40 CFR 262.20 without a manifest or or shipping paper?

___ ☒ ___

EST CC/DP/7/9

b. If "a" is yes, provide the identity of the source of the waste and a description of the quantity, type, and date received for each unmanifested hazardous waste shipment.

Procedural

** Not applicable to owners or operators of on-site facilities that do not receive any hazardous from off-site sources.

Section G CLOSURE AND POST CLOSURE (Part 5 Subpart G)

YES NO NI Remarks

1. Closure 265.112

a. Is the facility closure plan available for inspection?

✓

b. Does the plan identify:

i. maximum extent unclosed during facility life?

✓

NO PARTIAL CLOSURES

ii. maximum hazardous waste inventory?

✓

iv. estimated year of closure?

✓

2009 A-D.

v. schedule of closure activities?

✓

c. Has closure begun?

✓

*2. Post-Closure 265.118

a. Is the post-closure plan available for inspection?

b. Does this plan contain:

i. description of groundwater monitoring activities and frequencies?

ii. description of maintenance activities and frequencies for

AA. integrity of cap, final cover, or containment structures, where applicable

BB. facility monitoring equipment

iii. name, address, and phone number of person or office to contact during post-closure care period?

c. Has the post-closure period begun?

d. Is the written post-closure cost estimate available? 265.144

Applies only to disposal facilities.

Section I - USE AND MANGEMENT OF CONTAINERS (Part 265, Subpart I)

	YES	NO	NI	Remarks
1. Are containers in good condition? 265.171	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SOME ARE MARGINAL BUT STILL OK
2. Are containers compatible with waste in them? 265.172	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Are containers managed to prevent leaks? 265.173	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are containers stored closed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Are containers inspected weekly for leaks and defects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DAILY
6. Are ignitable and reactive wastes stored at least 15 meters (50 feet) from the facility property line? (Indicate if waste is ignitable or reactive). 265.176	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
7. Are incompatible wastes stored in separate containers? (If not, the provisions of 40 CFR 265.17(b) apply). 265.177	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
8. Are containers of incompatible waste separated or protected from each other by physical barriers or sufficient distance?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Section J - TANKS (Part 265, Subpart J)

YES	NO	NI	Remarks
-----	----	----	---------

- | | | | |
|----|---|---|------------------------------------|
| 1. | Are tanks used to store only those wastes which will not cause corrosion, leakage or premature failure of the tank? 265.192 | <input checked="" type="checkbox"/> — — | <u>STEEL TANKS - STILL BOTTOMS</u> |
| 2. | Do uncovered tanks have at least 60 cm (2 feet) of free-board, or dikes or other containment structures? | <input checked="" type="checkbox"/> — — | <u>CONTAINED</u> |
| 3. | Do continuous feed systems have a waste-feed cutoff? | — — <input checked="" type="checkbox"/> | <u>BATCH ADDITIONS</u> |
| 4. | Are waste analyses done before the tanks are used to store a substantially different waste than before? 265.193 | — — <input checked="" type="checkbox"/> | <u>DEDICATED TANKS</u> |
| 5. | Are required daily and weekly inspections done? 265.194 | <input checked="" type="checkbox"/> — — | — — — — |
| 6. | Are reactive & ignitable wastes in tanks protected or rendered non-reactive or non-ignitable? Indicate if waste is ignitable or reactive. (If waste is rendered non-reactive or non-ignitable, see treatment requirements.) 265.198 | — — <input checked="" type="checkbox"/> | — — — — |
| 7. | Are incompatible wastes stored in separate tanks? (If not, the provisions of 40 CFR 265.17(b) apply.) 265.199 | — — <input checked="" type="checkbox"/> | — — — — |
| 8. | Has the owner or operator observed the National Fire Protection Associations buffer zonerequirements for tanks containing ignitable or reactive wastes? | | |

Tank capacity: _____ gallons

Tank diameter: feet

2/17

Distance of tank from property line _____ feet

(See table 2 - 1 through 2 - 6 of NFPA's "Flammable and Combustible Liquids Code - 1977" to determine compliance.)

Appendix GN

Section A: Scope

1. Complete this Appendix if the owner or operator of a TSD facility also generates hazardous waste that is subsequently shipped off-site for treatment, storage, or disposal.

Section B: MANIFEST REQUIREMENTS (Part 262, Subpart B)

	YES	NO	NI	Remarks
(1) Does the operator have copies of the manifest available for review? 262.40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(2) Examine manifests for shipments in past 6 months. Indicate approximate number of manifested shipments during that period. <u>10</u>				
(3) Do the manifest forms examined contain the following information: (If possible, make copies of, or record information from, manifest(s) that do not contain the critical elements). 262.21				
a. Manifest document number?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Name, mailing address, telephone number, and EPA ID number of Generator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Name and EPA ID Number of Transporter(s)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>VALLEY CITY REFUSE</u>
d. Name, address, and EPA ID Number Designated permitted facility and alternate facility?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>GOLD SHIELD</u> <u>WAYNE DISPOSAL</u> <u>PETRO-CHEM</u>
e. The description of the waste(s) (DOT shipping name, DOT hazard class, DOT identification number)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. The total quantity of waste(s) and the type and number of containers loaded?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>BUCK + DRUMS</u>
g. Required certification?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
h. Required signatures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(4) Reportable exceptions 262.42				
a. For manifests examined in (2) (except for shipments within the last 35 days), enter the number of manifests for which the generator has NOT received a signed copy from the designated facility within 35 days of the date of shipment. <u>1</u> <u>MANIFEST # MI 0823982 DATED 2/20/86</u>				
b. For manifests indicated in (4a), enter the number for which the generator has submitted exception reports (40 CFR 262.42) to the Regional Administrator. <u>0</u>				

Section C: PRE-TRANSPORT REQUIREMENTS (Part 262, Subpart C)

	YES	NO	NI	Remarks
1. Is waste packaged in accordance with DOT regulations? (Required prior to movement of hazardous waste off-site) 262.30	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are waste packages marked and labeled in accordance with DOT regulations concerning hazardous waste materials? (Required for movement of hazardous waste off-site) 262.31 262.32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. If required, are placards available to transporters of hazardous waste? 262.33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. On-site accumulation of generated hazardous wastes. A HWMF may accumulate hazardous waste it generates either (A) in its storage facility [265.1(b)] or (B) in accordance with 40 CFR 262.34 [see 265.1(c)(7)]. Option B restricts all accumulation to tanks and containers. If the installation elects option A, check this box <input checked="" type="checkbox"/> and skip to Section D. If the installation elects option B, complete the following observations: See 40 CFR 262.34 January 11, 1982 Revision				
a. Is each container clearly marked with the start of accumulation date?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Have more than 90 days elapsed since the date inspected in (a)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Do wastes remain in accumulation tanks for more than 90 days?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Is each container and tank labeled or marked clearly with the words "Hazardous Waste"?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section D: - RECORDKEEPING AND REPORTING (Part 262, Subpart D)

	YES	NO	NI	Remarks
1. Are all test results and analyses needed for hazardous waste determinations retained for at least three years? 262.40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section E: - INTERNATIONAL SHIPMENTS (Part 262, Subpart E)

1. Has the installation imported or exported Hazardous Waste? 262.50	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(If answered Yes, complete the following as applicable.)				
a. Exporting Hazardous waste; has a generator:				

Appendix TR

	YES	NO	NI	Remarks
<u>Section A: SCOPE:</u>				
1. Complete this Appendix if the owner or operator transports hazardous waste subject to 40 CFR 263.10.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Does the transporter transport hazardous waste into the U.S. from abroad?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Does the transporter transport hazardous waste out from the U.S.?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Does the transporter mix hazardous waste of different DOT shipping descriptions by placing them into a single container?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Section B: MANIFEST SYSTEM AND RECORDKEEPING (Part 263, Subpart B)

1. Are copies of <u>completed</u> manifests available for review and retained for three years. 263.22	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Estimate the number of manifests for shipments completed during the past 6 months.		<u>195</u>		
3. Examine a representative number of manifests. Indicate number examined.		<u>50</u>		
4. Did transporter properly sign and date the manifests examined?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Do any manifests indicate shipments delivered to other than the designated facility? 263.21	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If (5) is "no," skip 6 and 7.				
6. Do any manifests indicate shipments delivered to other than an alternate facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Are shipments delivered to alternate facilities <u>only</u> because emergency prevents delivery to the designated facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

STATE OF MICHIGAN



JAMES J. BLANCHARD, Governor

DEPARTMENT OF NATURAL RESOURCES

~~RONALD O. SKOOG, Director~~

Gordon E. Guyer, Director

State Office Building

350 Ottawa, N. W.

Grand Rapids, MI 49503

Phone: 616-456-5071

July 25, 1986

NATURAL RESOURCES COMMISSION
THOMAS J. ANDERSON
MARLENE J. FLUHARTY
GORDON E. GUYER
KERRY KAMMER
O. STEWART MYERS
DAVID D. OLSON
RAYMOND POUPORE

Ms. Sharon Burns
Gold Shield Solvents
312 Ellsworth Ave., S. W.
Grand Rapids, MI 49503

RE: MID 020906764

Dear Ms. Burns:

This correspondence is written to acknowledge receipt of your letter dated July 15, 1986, which itemizes actions taken by the company to correct deficiencies noted during the RCRA inspection on July 11, 1986.

Therefore, this is to notify you that at this time the company has corrected the violation(s) identified in the compliance letter of July 14, 1986, with regard to the Resource Conservation and Recovery Act.

Sincerely,

Dale M. DeKraker
Environmental Quality Analyst
Hazardous Waste Division

DMD/mn

cc: m. Murphy, U.S. EPA, Region V (w/enc.)



GOLD SHIELD SOLVENTS

Division of Detrex Chemical Industries, Inc.

312 ELLSWORTH AVE., S.W. GRAND RAPIDS, MICHIGAN 49503

Area Code 616

Phone 454-9269-454-0443

July 15, 1986

WASTE DIV.
JUL 21 1986
GRAND RAPIDS

Mr. Dale DeKraker
State Department of Natural Resources
State Office Building
350 Ottawa N.W.
Grand Rapids, Michigan
49503

Dear Mr. DeKraker:

MIO 020 906 764

During your July 11, 1986 investigation of our facility located at 312 Ellsworth S.W., Grand Rapids, Michigan, we were found to be in violation of the requirements of Subtitle C of RCRA. Specifically, a copy of Manifest # MI 0823982 dated February 20, 1986 had not been received from the disposal facility.

Enclosed please find a copy of noted manifest, signed by the disposal facility with a documenting letter attached.

If further clarification of our compliance is requested please contact me.

Sincerely,

Sharon Burns

Gold Shield Solvents division of
DETREX CHEMICAL CORPORATION

XG: EPA - REGION IV



GOLD SHIELD SOLVENTS
Division of Detrex Corporation

12886 EATON AVE., DETROIT, MICHIGAN 48227

Telephone
(313) 491-4550

RECEIVED
JUL 21 1986

JUL 21 1986

GOLD SHIELD

To Whom it May Concern

This manifest MI 0823982 was mailed to Gold Shield, Grand Rapids on March 3, 1986 we accepted this material in our plant on February 20, 1986 , Attached please find copy of same. I feel this document was lost in the mail.

Sincerely yours,

Barbara Hooper
Secretary
Gold Shield Solvents, Detroit,



GOLD SHIELD SOLVENTS

Division of Detrex Chemical Industries, Inc.

312 ELLSWORTH AVE., S.W. GRAND RAPIDS, MICHIGAN 49503

Area Code 616

Phone 454-9269•454-0443

November 2, 1984

Department of Natural Resources
State Office Building
350 Ottawa N.W.
Grand Rapids, Michigan 49503

Attention: Mr. Dale M. DeKraker
Water Quality Specialist
Hazardous Waste Division

MID 020 906 764

In answer to your letter of October 22, 1984, the following has been accomplished:

- Item # 1 - Waste Analysis Plan has been implemented and procedure is now on file. (Plan attached)
- Item # 2 - Open Containers have been closed and will be an item listed on the new inspection list.

I hope this will meet with your approval and if you have any questions please do not hesitate to call.

Very truly yours,

James H. Harrison
Branch Manager

GOLD SHIELD SOLVENTS
Division of Detrex Chemical

JHH/sb

XC: EPA REGION IV RECEIVED

JOHN BORUNSKY / CEF NOV 7 1984
A. HOWARD

HAZARDOUS WASTE DIVISION

STATE OF MICHIGAN



NATURAL RESOURCES COMMISSION

THOMAS J. ANDERSON
E. R. CAROLLO
MARLENE J. FLUHARTY
STEPHEN F. MONSMA
O. STEWART MYERS
RAYMOND POUPORE
HARRY H. WHITELEY

JAMES J. BLANCHARD, Governor

DEPARTMENT OF NATURAL RESOURCES

RONALD O. SKOOG, Director

State Office Building
350 Ottawa, N. W.
Grand Rapids, MI 49503
Phone: 456-5071
November 13, 1984

Mr. James Harrison
Gold Shield Solvents
312 Ellsworth St., S. W.
Grand Rapids, MI 49503

RE: MID 020906764

Dear Mr. Harrison:

This correspondence is written to acknowledge receipt of your letter dated November 2, 1984, which itemizes actions taken by the company to correct deficiencies noted during the RCRA inspection on October 19, 1984.

Therefore, this is to notify you that at this time the company has corrected the violation(s) identified in the compliance letter of October 22, 1984, with regard to the Resource Conservation and Recovery Act.

Sincerely,

A handwritten signature in cursive script, reading "Dale M. DeKraker".

Dale M. DeKraker
Water Quality Specialist
Hazardous Waste Division

DMD/mn

cc: EPA Region V
Bohunsky/C&E
A. Howard

STATE OF MICHIGAN



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DEPARTMENT OF NATURAL RESOURCES

RONALD O. SKOOG, Director

State Office Building
350 Ottawa, N. W.
Grand Rapids, MI 49503
Phone: 456-5071
October 22, 1984

Mr. James Harrison
Gold Shield Solvents
312 Ellsworth, S. W.
Grand Rapids, MI 49503

RE: MID 020906764

Dear Mr. Harrison:

On October 19, 1984, staff of the Department of Natural Resources conducted an investigation as an agent of U.S. EPA of your facility located at 312 Ellsworth, S. W., Grand Rapids, Michigan to evaluate compliance of that facility with requirements of Subtitle C of the Resource Conservation and Recovery Act (RCRA), as amended. A copy of the completed RCRA inspection form is enclosed.

As a result of the investigation, staff of the Department of Natural Resources determined that the above facility is in violation of the requirements of Subtitle C of RCRA in the following areas:

- 1) The company has no waste analysis plan as required by 40 CFR, Part 265.14(b).
- 2) Many of the containers being used to store hazardous waste heels (F002) were not stored closed as required by 40 CFR, Part 265.173(a).

We request that you respond to this letter by November 5, 1984, providing documentation to this office regarding those actions being taken to correct the above stated violations and correction of same violations prior to December 1, 1984. The DNR will evaluate your response and forward a copy of the response to the U.S. EPA along with a recommendation on your facilities compliance status.

If you have any questions, feel free to contact Dale DeKraker at the above number and address your response to the above address on this letter.

Sincerely,

A handwritten signature in cursive script that reads "Ronald C. Waybrant".

Ronald C. Waybrant, Ph.D.
District Supervisor
Hazardous Waste Division

RCW/DMD/mn

R10261
184

cc: EPA Region V (w/ enc.)

J. Bohunsky/C&E file Al Howard, HWD



GOLD SHIELD SOLVENTS

Division of *Detrex Chemical Industries, Inc.*

312 ELLSWORTH AVE., S.W. GRAND RAPIDS, MICHIGAN 49503

Area Code 616

Phone 454-9269-454-0443

October 18, 1983

Department of Natural Resources
State Office Building
350 Ottawa N.W.
Grand Rapids, Michigan 49503

RECEIVED

OCT 20 1983

HAZARDOUS WASTE DIVISION

Attention: Mr. Dale M. DeKraker
Water Quality Specialist
Hazardous Waste Division

In reply to your letter of 9/13/83:

RE: MID 020906764

1. A directive has been issued by our corporate offices regarding inspection, training etc. - copy attached.
2. Responsible parties have been notified as to the correct freeboard minimum.

In reply to your letter of 9/16/83:

1. Concrete containment will be repaired and water tight before 11/1/83. Repairs will commence on 10/22/83 and are expected to be completed 10/25/83.
2. Drum waste being stored in basement will be shipped via licensed Hazardous Waste hauler by 11/15/83. Bulk storage tanks will be fabricated and in use before 1/1/84.
3. Problem addressed in item # 2 above.

I hope this meets with your approval and if you have any questions, please do not hesitate to call.

Very truly yours,

James H. Harrison
Branch Manager

KC: EPA REGION II
HWD - LANSING

GOLD SHIELD SOLVENTS

✓
NATURAL RESOURCES COMMISSION

JACOB A. HOEFER
E. M. LAITALA
HILARY F. SNELL
PAUL H. WENDLER
HARRY H. WHITELEY

855
11-2-83
Statute Code X
STATE OF MICHIGAN



JAMES J. BLANCHARD, Governor

DEPARTMENT OF NATURAL RESOURCES

HOWARD A. TANNER, Director

350 Ottawa Avenue, N. W.
Grand Rapids, Michigan 49503

September 13, 1983

Mr. James Harrison
Detrex Chemical Industries, Gold Shield Division
312 Ellsworth Ave., S.W.
Grand Rapids, MI 49507

Re: MID 020906764

Dear Mr. Harrison:

On September 7, 1983, staff of the Department of Natural Resources conducted an investigation of your facility located at 312 Ellsworth Ave., Grand Rapids, Michigan, to evaluate compliance of that facility with requirements of Subtitle C of the Resource Conservation and Recovery Act (RCRA), as amended. The completed RCRA inspection form is enclosed.

As a result of the investigation, staff of the Department of Natural Resources determined that the above facility is in violation of the requirements of Subtitle C of RCRA. Specifically, staff found that:

1. An inspection schedule was not available as required in 40 CFR, 265.15.
2. Tanks used to store waste heels were not being operated with a minimum of two feet of freeboard as required in 40 CFR, 265 Subpart J. One tank had a freeboard of about six inches while a second tank had only one - two inches of freeboard.

We request that you respond to this letter by September 26, 1983, providing documentation to this office regarding those actions being taken to correct the above stated violations and correction of same violations prior to October.

If you have any questions, feel free to contact Dale DeKraker at (616) 456-5071. Please address your response to the above address on this letter.

Sincerely,

HAZARDOUS WASTE DIVISION

Ronald C. Waybrant

Ronald C. Waybrant, Ph.D.
District Supervisor

RCW/DMD:bjc
enc.

cc: EPA, Reg. V (w/enc.)
HWD (w/enc.)

RCRA Inspection Report

EPA Identification Number: M I D 0 2 0 9 0 6 7 6 4

Installation Name: DETREX CHEMICAL INDUSTRIES, GOLD SHIELD SOLVENT DIVISION

Location Address: 312 ELLSWORTH, S.W.

City: GRAND RAPIDS

State: MICHIGAN

Date of inspection: 10-19-84

Time of inspection (from) 8:30AM (to) 11:00AM

Person(s) interviewed

Title

Telephone

Mr. JAMES HARRISON

BRANCH MANAGER

459-9269(616)

Inspector(s)

Agency/Title

Telephone

DALE DEKRAKER

MICHIGAN DNR

456-5871(616)

RONALD WAYBURN

" "

" "

Installation Activity (mark only one box)

Inspection Form(s)

☒ Treatment/Storage/Disposal per 40 CFR 265.1 and/or Generation and/or Transportation

A

☐ Treatment/Storage/Disposal (no generation or Transportation)

A

☐ Generation and Transportation

B, C

☐ Generation only

B

☐ Transportation only

C

KL: EPA REGION IV

INSPECTION FORM A

Section A: SCOPE OF INSPECTION.

- Interim status standards for treatment storage or disposal of HAZARDOUS WASTES SUBJECT TO 40 CFR 265.1. Complete Inspection Form A sections B, C, D, E, and G.
- Place an "X" in the box(es) corresponding to the facility's treatment, storage and disposal processes, and generation and/or transportation activity (if any). Complete only the applicable sections and appendices.

Permit application process(es) (EPA Form 3510-3) Inspection Form A section(s)

S01	<input checked="" type="checkbox"/>	storage in containers	(I)
S02	<input checked="" type="checkbox"/>	storage in tanks	(J)
T01	<input type="checkbox"/>	treatment in tanks	J
S04	<input type="checkbox"/>	storage in surface impoundment	K,F
T02	<input type="checkbox"/>	treatment in surface impoundment	K,F
D83	<input type="checkbox"/>	disposal in surface impoundment	K,F
S03	<input type="checkbox"/>	storage in waste pile	L
D81	<input type="checkbox"/>	disposal by land application	M,F
D80	<input type="checkbox"/>	disposal in landfill	N,F
T03	<input type="checkbox"/>	treatment by incineration	O/P
T04	<input type="checkbox"/>	treatment in devices other than tanks, surface impoundments, or incinerators	Q

Other activities

GENERATOR	<input checked="" type="checkbox"/>	APPENDIX	GN
TRANSPORTER	<input checked="" type="checkbox"/>	APPENDIX	TR

- Indicate any hazardous waste processes, by process code, which have been omitted from Part A of the facility's permit application.
NOTHING OMITTED, HOWEVER, COMPANY IS IN THE PROCESS OF REVISING ITS PART A TO ALLOW FOR GREATER STORAGE CAPACITY.
- Indicate any hazardous waste processes (by process code and line number on EPA Form 3510-3 page 1 of 5) which appear to be eligible for exclusion per 40 CFR 265.1(c). Provide a brief rationale for the possible exclusion.

T04 IS EXEMPT FROM RCRA AT THIS TIME.

Section B: GENERAL FACILITY STANDARDS: (Part 265 Subpart B)

	YES	NO	NI*	Remarks
1. Has the Regional Administrator been notified regarding: 265.12				
a. Receipt of hazardous waste from a foreign source?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>NONE RECEIVED</u>
b. Facility expansion?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>NO EXPANSION</u>
c. Change of owner or operator?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>NO CHANGE</u>
2. General Waste Analysis: 265.13				
a. Has the owner or operator obtained a detailed chemical and physical analysis of the waste?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>REFLUX PROCEDURES SPECIFIC GRAVITY</u>
b. Does the owner or operator have a detailed waste analysis plan on file at the facility?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
c. Does the waste analysis plan specify procedures for inspection and analysis of each movement of hazardous waste from off-site?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Security - Do security measures include: (if applicable) 265.14				
a. 24-Hour surveillance?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>ONE SHIFT OPERATION</u>
or				
b. i. Artificial or natural barrier around facility?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>BUILDING IS LOCKED</u>
and				
ii. Controlled entry?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>AFTER HOURS</u>
c. Danger sign(s) at entrance?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Owner or operator inspections: 265.15				
a. Does the owner or operator inspect the facility for malfunctions, deterioration, operator errors, and discharges of hazardous waste that may affect human health or the environment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

*Not Inspected

	YES	NO	NI	Remarks
b. Does the owner or operator have an inspection schedule at the facility?	<input checked="" type="checkbox"/>			
c. If so, does the schedule address the inspection of the following items:				
i. monitoring equipment?	<input checked="" type="checkbox"/>			
ii. safety and emergency equipment?	<input checked="" type="checkbox"/>			
iii. security devices?			<input checked="" type="checkbox"/>	NO FORMAL SECURITY DEVICES
iv. operating and structural equipment (i.e. dikes, pumps, etc.)?	<input checked="" type="checkbox"/>			
v. type of problems to be looked for during the inspection (e.g. leaky fitting, defective pump, etc.)?	<input checked="" type="checkbox"/>			
vi. inspection frequency (based upon the possible deterioration rate of the equipment)?	<input checked="" type="checkbox"/>			DAILY, WEEKLY
d. Are areas subject to spills inspected daily when in use?	<input checked="" type="checkbox"/>			
e. Does the owner or operator maintain an inspection log or summary of owner or operator inspections?	<input checked="" type="checkbox"/>			LOG BEING REVISED TO MORE CLOSELY MATCH SCHEDULE
f. Does the inspection log contain the following information:				
i. the date and time of the inspection?	<input checked="" type="checkbox"/>			
ii. the name of the inspector?	<input checked="" type="checkbox"/>			
iii. a notation of the observations made?	<input checked="" type="checkbox"/>			
iv. the date and nature of any repairs or remedial actions?	<input checked="" type="checkbox"/>			
5. Do personnel training records include: 265.16				
a. Job titles?	<input checked="" type="checkbox"/>			
b. Job descriptions?	<input checked="" type="checkbox"/>			

	YES	NO	NI	Remarks
c. Description of training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MSU COURSES
d. Records of training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Did facility personnel receive the required training by 5-19-81?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
f. Do new personnel receive required training within six months?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
g. Do personnel training records indicate that personnel have taken part in an annual review of initial training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	4/10/84
6. If required, are the following special requirements for ignitable, reactive, or incompatible wastes addressed? 265.17				
a. Special handling?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	WASTES ARE NOT
b. No smoking signs?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IGNITABLE REACTIVE, OR
c. Separation and protection from ignition sources?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	INCOMPATIBLE.

Section C: PREPAREDNESS AND PREVENTION: (Part 265 Subpart C)

1. Maintenance and Operation
of Facility: 265.31

Is there any evidence of fire,
explosion, or release of
hazardous waste or hazardous
waste constituent?

YES NO NI Remarks

___ ☒ ___

2. If required, does the facility
have the following equipment: 265.32

a. Internal communications or
alarm systems?

☒ ___

VOICE SUFFICIENT

b. Telephone or 2-way radios
at the scene of operations?

☒ ___

TELEPHONE

c. Portable fire extinguishers,
fire control, spill control
equipment and decontamination
equipment?

☒ ___

Indicate the volume of water and/or foam available for fire control:

CITY WATER - UNLIMITED SUPPLY

3. Testing and Maintenance of
Emergency Equipment: 265.33

a. Has the owner or operator
established testing and
maintenance procedures
for emergency equipment?

☒ ___

AIR PACK - 2/YEARLY
FIRE EXTINGUISHERS - QUARTERLY

b. Is emergency equipment
maintained in operable
condition?

☒ ___

4. Has owner or operator provided
immediate access to internal
alarms? (if needed) 265.34

☒ ___

5. Is there adequate aisle space
for unobstructed movement?

☒ ___

6. Has the owner or operator attempted
to make arrangements with local
authorities in case of an emergency
at the facility?

☒ ___

FIRE DEPT
DNR
POLICE

Section D: CONTINGENCY PLAN AND EMERGENCY PROCEDURES: (Part 265 Subpart D)

YES NO NI Remarks

1. Does the Contingency Plan contain the following information: 265.52

- a. The actions facility personnel must take to comply with §265.51 and 265.56 in response to fires, explosions, or any unplanned release of hazardous waste? (If the owner has a Spill Prevention, Control, and Countermeasures (SPCC) Plan, he needs only to amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with the requirements of this Part (as applicable.)
- b. Arrangements agreed by local police departments, fire departments hospitals, contractors, and State and local emergency response teams to coordinate emergency services pursuant to §265.37?
- c. Names, addresses, and phone numbers (office and home) of all persons qualified to act as emergency coordinators?
- d. A list of all emergency equipment at the facility which includes the location and physical description of each item on the list and a brief outline of its capabilities?
- e. An evacuation plan for facility personnel where there is a possibility that evacuation could be necessary? (This plan must describe signal(s) to be used to begin evacuation, evacuation routes, and alternate evacuation routes?)

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NOT APPLICABLE

2. Are copies of the Contingency Plan available at the site and local emergency organizations? 265.53

<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ON-SITE OFFERED TO LOCAL ORGANIZATIONS
-------------------------------------	--------------------------	--------------------------	--

	YES	NO	NI	Remarks
3. Emergency Coordinator 265.55				
a. Is the facility Emergency Coordinator identified?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Mr. Harrison</u>
b. Is coordinator familiar with all aspects of site operation and emergency procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Does the Emergency Coordinator have the authority to carry out the Contingency Plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Emergency Procedures 265.56				
If an emergency situation has occurred at this facility, has the Emergency Coordinator followed the emergency procedures listed in 265.56?				
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>NONE HAS OCCURRED</u>

Section E: MANIFEST SYSTEM, RECORDKEEPING, AND REPORTING: (Part 265 Subpart E)

	YES	NO	NI	Remarks
** 1. Use of Manifest System 265.71				
a. Does the facility follow the procedures listed in §265.71 for processing each manifest? (Particularly sending a copy of the signed manifest back to the generator within 30 days after delivery.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Are records of past shipments retained for 3 years?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
** 2. Does the owner or operator meet requirements regarding manifest discrepancies? 265.72	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
** Not applicable to owners or operators of on-site facilities that do not receive any waste from off-site sources.				
3. Operating Record 265.73				
a. Does the owner or operator maintain an operating record as required in 265.73?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GOOD OPERATING RECORD
b. Does the operating record contain the following information:				
i. The method(s) and date(s) of each waste's treatment, storage, or disposal as required in 40 CFR Part 265 Appendix I?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ii. The location and quantity of each hazardous waste within the facility? (This information should be cross-referenced to specific manifest number, if waste was accompanied by a manifest.)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
***iii. A map or diagram of each cell or disposal area				

*** only applies to disposal facilities

YES NO NI Remarks

showing the location and quantity of each hazardous waste? (This information should be cross-referenced to specific manifest number, if waste was accompanied by a manifest.)

iv. Records and results of all waste analyses, trial tests, monitoring data, and operator inspections?

v. Reports detailing all incidents that required implementation of the Contingency Plan?

vi. All closure and post closure costs as applicable?

4. Availability of Records 265.74

Are all facility records required under 40 CFR Part 265 available for inspection?

5.**Unmanifested Waste Reports 265.76

a. Has the facility accepted any hazardous waste from an off-site generator subject to 40 CFR 262.20 without a manifest or or shipping paper?

b. If "a" is yes, provide the identity of the source of the waste and a description of the quantity, type, and date received for each unmanifested hazardous waste shipment.

** Not applicable to owners or operators of on-site facilities that do not receive any hazardous from off-site sources.

Section G - CLOSURE AND POST CLOSURE (Part 265 Subpart G)

	YES	NO	NI	Remarks
1. Closure 265.112				
a. Is the facility closure plan available for inspection?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Does the plan identify:				
i. maximum extent unclosed during facility life?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	100%
ii. maximum hazardous waste inventory?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iv. estimated year of closure?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2009
v. schedule of closure activities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Has closure begun?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
*2. Post-Closure 265.118				
a. Is the post-closure plan available for inspection?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Does this plan contain:				
i. description of groundwater monitoring activities and frequencies?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ii. description of maintenance activities and frequencies for				
AA. integrity of cap, final cover, or containment structures, where applicable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BB. facility monitoring equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iii. name, address, and phone number of person or office to contact during post-closure care period?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Has the post-closure period begun?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Is the written post-closure cost estimate available? 265.144	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

*Applies only to disposal facilities.

Section I - USE AND MANGEMENT OF CONTAINERS (Part 265, Subpart I)

	YES	NO	NI	Remarks
1. Are containers in good condition? 265.171	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are containers compatible with waste in them? 265.172	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Are containers managed to prevent leaks? 265.173	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are containers stored closed?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	WASTE HEDS STORED IN BASEMENT - SOME ARE OPEN TOPPED, BUT CONTAINED
5. Are containers inspected weekly for leaks and defects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Are ignitable and reactive wastes stored at least 15 meters (50 feet) from the facility property line? (Indicate if waste is ignitable or reactive). 265.176	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NOT IGNITABLE or REACTIVE
7. Are incompatible wastes stored in separate containers? (If not, the provisions of 40 CFR 265.17(b) apply). 265.177	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
8. Are containers of incompatible waste separated or protected from each other by physical barriers or sufficient distance?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Section J - TANKS (Part 265, Subpart J)

- | | YES | NO | NI | Remarks |
|---|-------------------------------------|--------------------------|-------------------------------------|-------------------------------|
| 1. Are tanks used to store only those wastes which will not cause corrosion, leakage or premature failure of the tank? 265.192 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 2. Do uncovered tanks have at least 60 cm (2 feet) of free-board, or dikes or other containment structures? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | CONSTAINMENT |
| 3. Do continuous feed systems have a waste-feed cutoff? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | BATCH ADD |
| 4. Are waste analyses done before the tanks are used to store a substantially different waste than before? 265.193 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | ALWAYS THE SAME |
| 5. Are required daily and weekly inspections done? 265.194 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 6. Are reactive & ignitable wastes in tanks protected or rendered non-reactive or non-ignitable? 265.198
Indicate if waste is ignitable or reactive. (If waste is rendered non-reactive or non-ignitable, see treatment requirements.) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | NOT IGNITABLE
NOT REACTIVE |
| 7. Are incompatible wastes stored in separate tanks? 265.199
(If not, the provisions of 40 CFR 265.17(b) apply.) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 8. Has the owner or operator observed the National Fire Protection Associations buffer zone requirements for tanks containing ignitable or reactive wastes? | | | | |

Tank capacity: _____ gallons

Tank diameter: _____ feet

Distance of tank from property line _____ feet

(See table 2 - 1 through 2 - 6 of NFPA's "Flammable and Combustible Liquids Code - 1977" to determine compliance.)

Section A: Scope

1. Complete this Appendix if the owner or operator of a TSD facility also generates hazardous waste that is subsequently shipped off-site for treatment, storage, or disposal.

Section B: MANIFEST REQUIREMENTS (Part 262, Subpart B)

	YES	NO	NI	Remarks
(1) Does the operator have copies of the manifest available for review? 262.40	<input checked="" type="checkbox"/>			
(2) Examine manifests for shipments in past 6 months. Indicate approximate number of manifested shipments during that period. <u>3</u>				HEELS FROM SOLVENT RECOVERY
(3) Do the manifest forms examined contain the following information: (If possible, make copies of, or record information from, manifest(s) that do not contain the critical elements). 262.21				
a. Manifest document number?	<input checked="" type="checkbox"/>			
b. Name, mailing address, telephone number, and EPA ID number of Generator	<input checked="" type="checkbox"/>			
c. Name and EPA ID Number of Transporter(s)?	<input checked="" type="checkbox"/>			
d. Name, address, and EPA ID Number Designated permitted facility and alternate facility?	<input checked="" type="checkbox"/>			CHEMICAL RECOVERY
e. The description of the waste(s) (DOT shipping name, DOT hazard class, DOT identification number)?	<input checked="" type="checkbox"/>			ORM-A, F002
f. The total quantity of waste(s) and the type and number of containers loaded?	<input checked="" type="checkbox"/>			
g. Required certification?	<input checked="" type="checkbox"/>			
h. Required signatures?	<input checked="" type="checkbox"/>			
(4) Reportable exceptions 262.42				
a. For manifests examined in (2) (except for shipments within the last 35 days), enter the number of manifests for which the generator has NOT received a signed copy from the designated facility within 35 days of the date of shipment. <u>0</u>				
b. For manifests indicated in (4a), enter the number for which the generator has submitted exception reports (40 CFR 262.42) to the Regional Administrator. <u>0</u>				

Section C: PRE-TRANSPORT REQUIREMENTS (Part 262, Subpart C)

	YES	NO	NI	Remarks
1. Is waste packaged in accordance with DOT regulations? (Required prior to movement of hazardous waste off-site) 262.30	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are waste packages marked and labeled in accordance with DOT regulations concerning hazardous waste materials? (Required for movement of hazardous waste off-site) 262.31 262.32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. If required, are placards available to transporters of hazardous waste? 262.33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>BEST WOULD NOT BE REQUIRED</u>
4. On-site accumulation of generated hazardous wastes. A HWMF may accumulate hazardous waste it generates either (A) in its storage facility [265.1(b)] or (B) in accordance with 40 CFR 262.34 [see 265.1(c)(7)]. Option B restricts all accumulation to tanks and containers. If the installation elects option A, check this box <input checked="" type="checkbox"/> and skip to Section D. If the installation elects option B, complete the following observations: See 40 CFR 262.34 January 11, 1982 Revision				
a. Is each container clearly marked with the start of accumulation date?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Have more than 90 days elapsed since the date inspected in (a)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Do wastes remain in accumulation tanks for more than 90 days?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Is each container and tank labeled or marked clearly with the words "Hazardous Waste"?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section D: - RECORDKEEPING AND REPORTING (Part 262, Subpart D)

	YES	NO	NI	Remarks
1. Are all test results and analyses needed for hazardous waste determinations retained for at least three years? 262.40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section E: - INTERNATIONAL SHIPMENTS (Part 262, Subpart E)

1. Has the installation imported or exported Hazardous Waste? 262.50	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(If answered Yes, complete the following as applicable.)				
a. Exporting Hazardous waste; has a generator:				

	YES	NO	NI	Remarks
i. Notified the Administrator in writing?				
ii. Obtained the signature of the foreign consignee confirming delivery of the waste(s) in the foreign country?				
iii. Met the Manifest requirements?				
b. Importing Hazardous Waste; has the generator met the manifest requirements?				

Appendix TR

Section A: SCOPE:

	YES	NO	NI	Remarks
1. Complete this Appendix if the owner or operator transports hazardous waste subject to 40 CFR 263.10.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	TRANSPORTS LISTED FLUOR SOLVENTS FOR RECLAIM
2. Does the transporter transport hazardous waste into the U.S. from abroad?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
3. Does the transporter transport hazardous waste out from the U.S.?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
4. Does the transporter mix hazardous waste of different DOT shipping descriptions by placing them into a single container?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Section B: MANIFEST SYSTEM AND RECORDKEEPING (Part 263, Subpart B)

1. Are copies of <u>completed</u> manifests available for review and retained for three years. 263.22	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Estimate the number of manifests for shipments completed during the past 6 months.		120		
3. Examine a representative number of manifests. Indicate number examined.		25		
4. Did transporter properly sign and date the manifests examined?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Do any manifests indicate shipments delivered to other than the designated facility? 263.21	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
If (5) is "no," skip 6 and 7.				
6. Do any manifests indicate shipments delivered to other than an alternate facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Are shipments delivered to alternate facilities <u>only</u> because emergency prevents delivery to the designated facility?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

RCRA Inspection Report

EPA Identification Number: M 3 0 0 2 0 9 0 6 7 6 X

Installation Name: DETREX CHEMICAL INDUSTRIES - GOLD SHIELD SOLVENT DIVISION

Location Address: 312 ELLSWORTH AVE. S.W.

City: GRAND RAPIDS

State: MICHIGAN

Date of inspection: 9-7-83

Time of inspection (from) 10:00AM (to) 11:5AM

Person(s) interviewed

Title

Telephone

MR. JAMES HARRISON

BRANCH MANAGER

(616) 454-9269

Inspector(s)

Agency/Title

Telephone

DALE DEKRAKER

MICHIGAN DNR

(616) 456-5071

Installation Activity (mark only one box)

Inspection Form(s)

☒ Treatment/Storage/Disposal per 40 CFR 265.1 and/or
Generation and/or Transportation

A

☐ Treatment/Storage/Disposal (no generation or Transportation)

A

☐ Generation and Transportation

B, C

☐ Generation only

B

☐ Transportation only

C

INSPECTION FORM A

Section A: SCOPE OF INSPECTION.

1. Interim status standards for treatment storage or disposal of HAZARDOUS WASTES SUBJECT TO 40 CFR 265.1. Complete Inspection Form A sections B, C, D, E, and G.
2. Place an "X" in the box(es) corresponding to the facility's treatment, storage and disposal processes, and generation and/or transportation activity (if any). Complete only the applicable sections and appendixes.

Permit application process(es) (EPA Form 3510-3) Inspection Form A section(s)

S01	<input checked="" type="checkbox"/>	storage in containers	(I)
S02	<input checked="" type="checkbox"/>	storage in tanks	(J)
T01	<input type="checkbox"/>	treatment in tanks	J
S04	<input type="checkbox"/>	storage in surface impoundment	K,F
T02	<input type="checkbox"/>	treatment in surface impoundment	K,F
D83	<input type="checkbox"/>	disposal in surface impoundment	K,F
S03	<input type="checkbox"/>	storage in waste pile	L
D81	<input type="checkbox"/>	disposal by land application	M,F
D80	<input type="checkbox"/>	disposal in landfill	N,F
T03	<input type="checkbox"/>	treatment by incineration	O/P
T04	<input type="checkbox"/>	treatment in devices other than tanks, surface impoundments, or incinerators	Q

Other activities

GENERATOR	<input checked="" type="checkbox"/>	APPENDIX	(GN)
TRANSPORTER	<input checked="" type="checkbox"/>	APPENDIX	(TR)

3. Indicate any hazardous waste processes, by process code, which have been omitted from Part A of the facility's permit application.

NONE

4. Indicate any hazardous waste processes (by process code and line number on EPA Form 3510-3 page 1 of 5) which appear to be eligible for exclusion per 40 CFR 265.1(c). Provide a brief rationale for the possible exclusion.

T04 REFERS TO THE SOLVENT RECLAIM PROCESS - IS EXCLUDED

Section B: GENERAL FACILITY STANDARDS: (Part 265 Subpart B)

	YES	NO	NI*	Remarks
1. Has the Regional Administrator been notified regarding: 265.12				
a. Receipt of hazardous waste from a foreign source?	—	—	✓	<u>NONE RECEIVED</u>
b. Facility expansion?	—	—	✓	<u>NONE PLANNED</u>
c. Change of owner or operator?	—	—	✓	<u>NO CHANGE</u>
2. General Waste Analysis: 265.13				
a. Has the owner or operator obtained a detailed chemical and physical analysis of the waste?	✓	—	—	<u>CHEMICAL ANALYSIS KNOWN / SOLVENT KNOWN AT TIME OF RECYCLE</u>
b. Does the owner or operator have a detailed waste analysis plan on file at the facility?	—	—	✓	<u>RECYCLE PROCESS - NO WRITTEN PLAN.</u>
c. Does the waste analysis plan specify procedures for inspection and analysis of each movement of hazardous waste from off-site?	—	—	✓	<u>RECYCLE - HOWEVER, A PLAN IS BEING DEVELOPED FOR WASTE CONFIRMATION.</u>
3. Security - Do security measures include: (if applicable) 265.14				
a. 24-Hour surveillance?	—	✓	—	<u>1 SHIFT OPERATION</u>
or				
b. i. Artificial or natural barrier around facility?	✓	—	—	<u>OPERATION ENTIRELY INDOORS</u>
and				
ii. Controlled entry?	✓	—	—	<u>BLOK. LOCKED AT NIGHT</u>
c. Danger sign(s) at entrance?	✓	—	—	
4. Owner or operator inspections: 265.15				
a. Does the owner or operator inspect the facility for malfunctions, deterioration, operator errors, and discharges of hazardous waste that may affect human health or the environment?	✓	—	—	

*Not Inspected

YES NO NI Remarks

- b. Does the owner or operator have an inspection schedule at the facility?
- c. If so, does the schedule address the inspection of the following items:
- i. monitoring equipment?
 - ii. safety and emergency equipment?
 - iii. security devices?
 - iv. operating and structural equipment (i.e. dikes, pumps, etc.)?
 - v. type of problems to be looked for during the inspection (e.g. leaky fitting, defective pump, etc.)?
 - vi. inspection frequency (based upon the possible deterioration rate of the equipment)?
- d. Are areas subject to spills inspected daily when in use?
- e. Does the owner or operator maintain an inspection log or summary of owner or operator inspections?
- f. Does the inspection log contain the following information:
- i. the date and time of the inspection?
 - ii. the name of the inspector?
 - iii. a notation of the observations made?
 - iv. the date and nature of any repairs or remedial actions?

YES	NO	NI	Remarks
	✓		
		✓	NO ACTUAL MONITORING EQUIPMENT
	✓		
		✓	NO REAL SECURITY DEVICES
	✓		
	✓		
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			
✓			

5. Do personnel training records include: 265.16

- a. Job titles?
- b. Job descriptions?

	YES	NO	NI	Remarks
c. Description of training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Records of training?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Did facility personnel receive the required training by 5-19-81?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
f. Do new personnel receive required training within six months?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
g. Do personnel training records indicate that personnel have taken part in an annual review of initial training?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>DUE THIS MONTH</u>
6. If required, are the following special requirements for ignitable, reactive, or incompatible wastes addressed? 265.17				
a. Special handling?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>WASTE NOT IGNITABLE</u>
b. No smoking signs?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>or REACTIVE</u>
c. Separation and protection from ignition sources?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Section C: PREPAREDNESS AND PREVENTION: (Part 265 Subpart C)

1. Maintenance and Operation of Facility: 265.31

Is there any evidence of fire, explosion, or release of hazardous waste or hazardous waste constituent?

YES NO NI Remarks

— ✓ —

2. If required, does the facility have the following equipment: 265.32

a. Internal communications or alarm systems?

✓ — — VOICE CONTACT - SMALL PLANT

b. Telephone or 2-way radios at the scene of operations?

✓ — — TELEPHONE

c. Portable fire extinguishers, fire control, spill control equipment and decontamination equipment?

✓ — — SORBENTS FIRE EXTINGUISHERS

Indicate the volume of water and/or foam available for fire control:

CITY WATER - UNLIMITED

3. Testing and Maintenance of Emergency Equipment: 265.33

a. Has the owner or operator established testing and maintenance procedures for emergency equipment?

✓ — — 2 TIMES / YEAR SCOTT AIR PAC

b. Is emergency equipment maintained in operable condition?

✓ — —

4. Has owner or operator provided immediate access to internal alarms? (if needed) 265.34

✓ — — TELEPHONES EASILY ACCESSIBLE NO ALARMS PRESENT.

5. Is there adequate aisle space for unobstructed movement?

✓ — — BUT MARGINAL AT THIS POINT

6. Has the owner or operator attempted to make arrangements with local authorities in case of an emergency at the facility?

✓ — — FIRE DEPARTMENT

Section D: CONTINGENCY PLAN AND EMERGENCY PROCEDURES: (Part 265 Subpart D)

YES NO NI Remarks

1. Does the Contingency Plan contain the following information: 265.52
 - a. The actions facility personnel must take to comply with §265.51 and 265.56 in response to fires, explosions, or any unplanned release of hazardous waste? (If the owner has a Spill Prevention, Control, and Countermeasures (SPCC) Plan, he needs only to amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with the requirements of this Part (as applicable.)

✓ — —
 - b. Arrangements agreed by local police departments, fire departments hospitals, contractors, and State and local emergency response teams to coordinate emergency services pursuant to §265.37?

✓ — —
 - c. Names, addresses, and phone numbers (office and home) of all persons qualified to act as emergency coordinators?

✓ — —
 - d. A list of all emergency equipment at the facility which includes the location and physical description of each item on the list and a brief outline of its capabilities?

✓ — —
 - e. An evacuation plan for facility personnel where there is a possibility that evacuation could be necessary? (This plan must describe signal(s) to be used to begin evacuation, evacuation routes, and alternate evacuation routes?)

— — ✓

MATERIAL WOULD NOT REQUIRE EVACUATION
2. Are copies of the Contingency Plan available at the site and local emergency organizations? 265.53

✓ — —

FIRE DEPT.

	YES	NO	NI	Remarks
3. Emergency Coordinator 265.55				
a. Is the facility Emergency Coordinator identified?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>MR HARRISON</u>
b. Is coordinator familiar with all aspects of site operation and emergency procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Does the Emergency Coordinator have the authority to carry out the Contingency Plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Emergency Procedures 265.56				
If an emergency situation has occurred at this facility, has the Emergency Coordinator followed the emergency procedures listed in 265.56?				
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>NEVER HAS OCCURRED</u>

Section E: MANIFEST SYSTEM, RECORDKEEPING, AND REPORTING: (Part 265 Subpart E)

	YES	NO	NI	Remarks
** 1. Use of Manifest System 265.71				
a. Does the facility follow the procedures listed in §265.71 for processing each manifest? (Particularly sending a copy of the signed manifest back to the generator within 30 days after delivery.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Are records of past shipments retained for 3 years?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
** 2. Does the owner or operator meet requirements regarding manifest discrepancies? 265.72	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
** Not applicable to owners or operators of on-site facilities that do not receive any waste from off-site sources.				
3. Operating Record 265.73				
a. Does the owner or operator maintain an operating record as required in 265.73?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Does the operating record contain the following information:				
i. The method(s) and date(s) of each waste's treatment, storage, or disposal as required in 40 CFR Part 265 Appendix I?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ii. The location and quantity of each hazardous waste within the facility? (This information should be cross-referenced to specific manifest number, if waste was accompanied by a manifest.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
***iii. A map or diagram of each cell or disposal area				

*** only applies to disposal facilities

	YES	NO	NI	Remarks
showing the location and quantity of each hazardous waste? (This information should be cross-referenced to specific manifest number, if waste was accompanied by a manifest.)	—	—	✓	<u>NOT A LANDFILL</u>
iv. Records and results of all waste analyses, trial tests, monitoring data, and operator inspections?	✓	—	—	—
v. Reports detailing all incidents that required implementation of the Contingency Plan?	—	—	✓	<u>PLAN NEVER IMPLEMENTED</u>
vi. All closure and post closure costs as applicable?	✓	—	—	—
4. Availability of Records 265.74				
Are all facility records required under 40 CFR Part 265 available for inspection?	✓	—	—	—
5. **Unmanifested Waste Reports 265.76				
a. Has the facility accepted any hazardous waste from an off-site generator subject to 40 CFR 262.20 without a manifest or or shipping paper?	—	✓	—	<u>COMPANY POLICY PROHIBITS</u>
b. If "a" is yes, provide the identity of the source of the waste and a description of the quantity, type, and date received for each unmanifested hazardous waste shipment.	—	—	—	—

** Not applicable to owners or operators of on-site facilities that do not receive any hazardous from off-site sources.

Section F - GROUNDWATER MONITORING (Part 265 Subpart F) *n/a*

Complete this section for facilities that treat, store, or dispose of hazardous waste in landfills, surface impoundments and/or by land treatment.

	YES	NO	NI	Remarks
1. Has the owner or operator of the facility implemented a groundwater monitoring system? 265.90	_____	_____	_____	_____
If "no", Skip to number 11.				
2. Has the owner or operator of the facility implemented an alternate groundwater monitoring system as described in 265.90(d)?	_____	_____	_____	_____
If "yes", skip to number 12.				
If "no", continue				
3. Does the groundwater monitoring system meet the following requirements of 265.91:				
a. At least one well installed hydraulically up-gradient from the limit of the waste management area?	_____	_____	_____	_____
Indicate the total number of up-gradient wells.				
b. At least three wells installed hydraulically down-gradient at the limit of the waste management area?	_____	_____	_____	_____
Indicate the total number of downgradient wells.				
c. Are the number, locations, and depths of all wells sufficient to yield groundwater samples that are representative of groundwater under the facility?	_____	_____	_____	_____

Sketch the locations of the wells relative to the waste management area.

	YES	NO	NI	Remarks
d. Are the monitoring wells constructed in accordance with 265.91(c) (e.g. properly cased, screened, etc.)?				
4. Has the owner or operator developed a written groundwater sampling and analysis plan that includes procedures and techniques for: 265.92				
a. Sample collection?				
b. Sample preservation and shipment?				
c. Analytical procedures?				
d. Chain of custody control?				
5. Does the owner or operator follow his groundwater sampling and analysis plan?				
6. Is the groundwater sampling and analysis plan maintained at the facility?				
7. Has the owner or operator determined the concentration or value of all the groundwater monitoring parameters of 265.92(b) in accordance with paragraphs c and d of 265.92?				

	YES	NO	NI	Remarks
8. Has the owner or operator developed an <u>outline</u> of a comprehensive ground-water quality assesment program that is capable of determining: 262.93				
a. Whether hazardous waste or hazardous waste constituents have entered the groundwater?	—	—	—	
b. The rate and extent of migration of hazardous waste or hazardous waste constituents in the groundwater?	—	—	—	
c. The concentration of hazardous waste or hazardous waste constituents in the groundwater?	—	—	—	
*9. Has the owner or operator performed a statistical analysis of his ground-water monitoring data as required in 265.93(b)?	—	—	X	
*10. Was there a statistically significant increase (or pH decrease) detected in any well?	—	—	X	
a. If "yes," has the owner or operator responded in accordance with the procedures prescribed in 265.93 paragraphs c through f?	—	—	X	
Skip to number 14				
11. Has the owner or operator prepared a written groundwater monitoring waiver demonstration for the facility?	—	—	—	
a. Is the waiver demonstration maintained at the facility?	—	—	—	
b. Has the waiver demonstration been certified by a qualified geologist or geotechnical engineer?	—	—	—	

Note: Inspectors should request a copy of the waiver document.

c. Skip questions 12, 13, and 14.

*These requirements do not take effect until the first 6 months after November 19, 1982. The latest date for compliance with these requirements is May 19, 1983.

	YES	NO	NI	Remarks
12. Has the owner or operator submitted an alternate groundwater monitoring system to the Regional Administrator?	_____	_____	_____	_____
a. Has the plan been certified by a qualified geologist or geotechnical engineer?	_____	_____	_____	_____
Note: If the plan for an alternate groundwater monitoring system was not submitted to the Regional Administrator the inspector should request a copy for review.				
13. Does the alternate groundwater monitoring plan address the requirements of 265.90(d)?	_____	_____	_____	_____
14. Does the owner or operator submit reports and maintain records as required in 265.94?	_____	_____	_____	_____

Section G - CLOSURE AND POST CLOSURE (Part 265 Subpart G)

	YES	NO	NI	Remarks
1. Closure 265.112				
a. Is the facility closure plan available for inspection?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>\$3639 ESTIMATED COST</u>
b. Does the plan identify:				<u>AS OF 1-5-83</u>
i. maximum extent unclosed during facility life?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>N/A</u>
ii. maximum hazardous waste inventory?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>N 300 DRUMS</u>
iv. estimated year of closure?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>N/A</u>
v. schedule of closure activities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Has closure begun?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
*2. Post-Closure 265.118				
a. Is the post-closure plan available for inspection?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Does this plan contain:				
i. description of groundwater monitoring activities and frequencies?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ii. description of maintenance activities and frequencies for				
AA. integrity of cap, final cover, or containment structures, where applicable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BB. facility monitoring equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iii. name, address, and phone number of person or office to contact during post-closure care period?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Has the post-closure period begun?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Is the written post-closure cost estimate available? 265.144	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

*Applies only to disposal facilities.

Section I - USE AND MANGEMENT OF CONTAINERS (Part 265, Subpart I)

	YES	NO	NI	Remarks
1. Are containers in good condition? 265.171	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are containers compatible with waste in them? 265.172	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>LINED CONTAINERS WHERE APPLICABLE</u>
3. Are containers managed to prevent leaks? 265.173	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are containers stored closed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Are containers inspected weekly for leaks and defects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>DAILY VISUAL INSPECTION</u>
6. Are ignitable and reactive wastes stored at least 15 meters (50 feet) from the facility property line? (Indicate if waste is ignitable or reactive). 265.176	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>N/A</u>
7. Are incompatible wastes stored in separate containers? (If not, the provisions of 40 CFR 265.17(b) apply). 265.177	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>N/A</u>
8. Are containers of incompatible waste separated or protected from each other by physical barriers or sufficient distance?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<u>N/A</u>

Section J - TANKS (Part 265, Subpart J)

- | | YES | NO | NI | Remarks |
|---|-------------------------------------|-------------------------------------|-------------------------------------|---|
| 1. Are tanks used to store only those wastes which will not cause corrosion, leakage or premature failure of the tank? 265.192 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <u>STILL BOTTOMS</u> |
| 2. Do uncovered tanks have at least 60 cm (2 feet) of free-board, or dikes or other containment structures? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <u>2" FREE BOARD OBSERVED IN ONE TANK</u> |
| 3. Do continuous feed systems have a waste-feed cutoff? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <u>N/A - MANUAL ADDITION</u> |
| 4. Are waste analyses done before the tanks are used to store a substantially different waste than before? 265.193 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <u>ALWAYS THE SAME WASTE</u> |
| 5. Are required daily and weekly inspections done? 265.194 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 6. Are reactive & ignitable wastes in tanks protected or rendered non-reactive or non-ignitable? 265.198
Indicate if waste is ignitable or reactive. (If waste is rendered non-reactive or non-ignitable, see treatment requirements.) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <u>N/A</u> |
| 7. Are incompatible wastes stored in separate tanks? 265.199
(If not, the provisions of 40 CFR 265.17(b) apply.) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <u>N/A</u> |
| 8. Has the owner or operator observed the National Fire Protection Associations buffer zone requirements for tanks containing ignitable or reactive wastes? | | | | |

Tank capacity: _____ gallons

Tank diameter: _____ feet

Distance of tank from property line _____ feet

(See table 2 - 1 through 2 - 6 of NFPA's "Flammable and Combustible Liquids Code - 1977" to determine compliance.)

Section A: Scope

1. Complete this Appendix if the owner or operator of a TSD facility also generates hazardous waste that is subsequently shipped off-site for treatment, storage, or disposal.

Section B: MANIFEST REQUIREMENTS (Part 262, Subpart B)

	YES	NO	NI	Remarks
(1) Does the operator have copies of the manifest available for review? 262.40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(2) Examine manifests for shipments in past 6 months. Indicate approximate number of manifested shipments during that period.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	0 - NO WASTE HEELS SHIPPED IN LAST YEAR
(3) Do the manifest forms examined contain the following information: (If possible, make copies of, or record information from, manifest(s) that do not contain the critical elements). 262.21				
a. Manifest document number?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Name, mailing address, telephone number, and EPA ID number of Generator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Name and EPA ID Number of Transporter(s)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Name, address, and EPA ID Number Designated permitted facility and alternate facility?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PERO-CHEM
e. The description of the waste(s) (DOT shipping name, DOT hazard class, DOT identification number)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	WASTE HEELS FOOL, FOOL
f. The total quantity of waste(s) and the type and number of containers loaded?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DRUMS ONLY
g. Required certification?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
h. Required signatures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(4) Reportable exceptions 262.42				
a. For manifests examined in (2) (except for shipments within the last 35 days), enter the number of manifests for which the generator has NOT received a signed copy from the designated facility within 35 days of the date of shipment.				
b. For manifests indicated in (4a), enter the number for which the generator has submitted exception reports (40 CFR 262.42) to the Regional Administrator.				

Section C: PRE-TRANSPORT REQUIREMENTS (Part 262, Subpart C)

	YES	NO	NI	Remarks
1. Is waste packaged in accordance with DOT regulations? (Required prior to movement of hazardous waste off-site) 262.30	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are waste packages marked and labeled in accordance with DOT regulations concerning hazardous waste materials? (Required for movement of hazardous waste off-site) 262.31 262.32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. If required, are placards available to transporters of hazardous waste? 262.33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. On-site accumulation of generated hazardous wastes. A HWMF may accumulate hazardous waste it generates either (A) in its storage facility [265.1(b)] or (B) in accordance with 40 CFR 262.34 [see 265.1(c)(7)]. Option B restricts all accumulation to tanks and containers. If the installation elects option A, check this box <input checked="" type="checkbox"/> and skip to Section D. If the installation elects option B, complete the following observations: See 40 CFR 262.34 January 11, 1982 Revision				
a. Is each container clearly marked with the start of accumulation date?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Have more than 90 days elapsed since the date inspected in (a)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Do wastes remain in accumulation tanks for more than 90 days?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Is each container and tank labeled or marked clearly with the words "Hazardous Waste"?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section D: - RECORDKEEPING AND REPORTING (Part 262, Subpart D)

	YES	NO	NI	Remarks
1. Are all test results and analyses needed for hazardous waste determinations retained for at least three years? 262.40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section E: - INTERNATIONAL SHIPMENTS (Part 262, Subpart E)

1. Has the installation imported or exported Hazardous Waste? 262.50	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(If answered Yes, complete the following as applicable.)				
a. Exporting Hazardous waste; has a generator:				

Appendix TR

Section A: SCOPE:

1. Complete this Appendix if the owner or operator transports hazardous waste subject to 40 CFR 263.10.
2. Does the transporter transport hazardous waste into the U.S. from abroad?
3. Does the transporter transport hazardous waste out from the U.S.?
4. Does the transporter mix hazardous waste of different DOT shipping descriptions by placing them into a single container?

YES NO NI Remarks

✓			
	✓		
	✓		
	✓		

Section B: MANIFEST SYSTEM AND RECORDKEEPING (Part 263, Subpart B)

1. Are copies of completed manifests available for review and retained for three years. 263.22
2. Estimate the number of manifests for shipments completed during the part 6 months.
3. Examine a representative number of manifests. Indicate number examined.
4. Did transporter properly sign and date the manifests examined?
5. Do any manifests indicate shipments delivered to other than the designated facility? 263.21
If (5) is "no," skip 6 and 7.
6. Do any manifests indicate shipments delivered to other than an alternate facility?
7. Are shipments delivered to alternate facilities only because emergency prevents delivery to the designated facility?

✓			
			120 for 6 mos.
			20
✓			
	✓		

MR JAMES HARRISON

DETREX CHEMICAL INDUSTRIES - GOLD SHIELD DIVISION

312 ELLSWORTH AVE. S.W.

GRAND RAPIDS, MICHIGAN 49507

Re: MID MID 020906764

Dear MR HARRISON,

On SEPTEMBER 7, 1983, staff of the Department of Natural Resources conducted an investigation of your facility located at 312 ELLSWORTH AVE. GRAND RAPIDS, Michigan to evaluate compliance of that facility with requirements of Subtitle C of the Resource Conservation and Recovery Act (RCRA), as amended. The completed RCRA inspection form is enclosed.

As a result of the investigation, staff of the Department of Natural Resources determined that the above facility is in violation of the requirements of Subtitle C of RCRA. Specifically, staff found that:

- 1) ^{AN INSPECTION} ~~THE OWNER~~ SCHEDULE WAS NOT AVAILABLE AS REQUIRED IN 40 CFR 265.15.
- 2) TANKS USED TO STORE WASTE WHEELS WERE NOT BEING OPERATED WITH A MINIMUM OF 2 FEET OF FREEBOARD AS REQUIRED IN 40 CFR ²⁶⁵ SUBPART J. ONE TANK HAD A FREEBOARD OF ABOUT 6 INCHES WHILE A SECOND TANK HAD ONLY 1-2 INCHES OF FREEBOARD.

We request that you respond to this letter by SEPT. 26 1983, providing documentation to this office regarding those actions being taken to correct the above stated violations and correction of same violations prior to OCTOBER.

If you have any questions, feel free to contact DALE DEKORSEN at (616) 456-5071. Please address your response to the above address on this letter.

Sincerely,

HAZARDOUS WASTE DIVISION

Ronald C. Waybrant
District Supervisor

Status = 0
dw 5/29/84

STATE OF MICHIGAN



JAMES J. BLANCHARD, Governor

DEPARTMENT OF NATURAL RESOURCES

NATURAL RESOURCES COMMISSION
THOMAS J. ANDERSON
E. R. CAROLLO
JACOB A. HOEFER
STEPHEN F. MONSMA
HILARY F. SNELL
PAUL H. WENDLER
HARRY H. WHITELEY

RONALD O. SKOOG, Director
State Office Building
350 Ottawa, N. W.
Grand Rapids, MI 49503
Phone: 456-5071
April 23, 1984

Mr. James Harrison
Gold Shield Solvents
312 Ellsworth St., SW
Grand Rapids, MI 49502

Detrex Chemical Industries

RE: MID ~~091605972~~ 020966764

Dear Mr. Harrison:

On April 23, 1984, staff of the Hazardous Waste Division, Department of Natural Resources, conducted an investigation as an agent of U.S. EPA of your facility located at 312 Ellsworth Street in Grand Rapids, Michigan to evaluate compliance of that facility with requirements of Subtitle C of the Resource Conservation and Recovery Act (RCRA), as amended.

As a result of that investigation, staff of the Department of Natural Resources have determined that the above facility is in compliance with the transporter requirements of Subtitle C of RCRA.

If you have any questions regarding this matter please feel free to contact Dale DeKraker at the above number.

Sincerely,

Ronald C. Waybrant

Ronald C. Waybrant, Ph.D.
District Supervisor
Hazardous Waste Division

RCW/DDK/mn

cc: EPA Region V (w/ enc.)
HWD, Lansing (w/ enc.)

Enclosure

RCRA Inspection Report MD020906764EPA Identification Number: M I D 0 2 0 9 0 6 7 6 4Installation Name: DETREX CHEMICAL INDUSTRIES, INC.GOLD SHIELD SOLVENT DIVISIONLocation Address: 312 ELLSWORTH C.W.City: GRAND RAPIDSState: MICHIGANDate of inspection: 4-23-84Time of inspection (from) 1:15 PM (to) 2:00 PM

Person(s) interviewed

Title

Telephone

Mr. JAMES HARRISONBRANCH MANAGER(616) 454-9269

Inspector(s)

Agency/Title

Telephone

DALE DEKRAKERMICHIGAN DNR(616) 456-5071Installation Activity (mark only one box)Inspection Form(s)☒ Treatment/Storage/Disposal per 40 CFR 265.1 and/or
Generation and/or Transportation

A

☐ Treatment/Storage/Disposal (no generation or Transportation)

A

☐ Generation and Transportation

B, C

☐ Generation only

B

☒ Transportation only(C)

TRANSPORTER ONLY FORM COMPLETED DURING THIS
VISIT. TSD INSPECTION WILL BE PERFORMED THIS
SUMMER.

X.C. EPA REGION V
AND LANSING

Inspection Form C

Section A: SCOPE OF INSPECTION

YES NO NI Remarks

1. Complete this inspection form for transporters of hazardous waste subject to 40 CFR 263.10.
2. Does the transporter transport hazardous waste into the U.S. from abroad?
3. Does the transporter transport hazardous waste out from the U.S.?
4. Does the transporter mix hazardous waste of different DOT shipping descriptions by placing them into a single container.

Section B: MANIFEST SYSTEM AND RECORDKEEPING (Part 263, Subpart B)

1. Are copies of completed manifests available for review and retained for three years. 263.22
2. Estimate the number of manifests for shipments completed during the past 6 months.
3. Examine a representative number of manifests. Indicate number examined.
4. Did transporter properly sign and date the manifests examined?
5. Do any manifests indicate shipments delivered to other than the designated facility? 263.21
If (5) is "no," skip 6 and 7.
6. Do any manifests indicate shipments delivered to other than an alternate facility?
7. Are shipments delivered to alternate facilities only because emergency prevents delivery to the designated facility?



GOLD SHIELD SOLVENTS

Division of Detrex Chemical Industries, Inc.

312 ELLSWORTH AVE., S.W. GRAND RAPIDS, MICHIGAN 49503

Area Code 616

Phone 454-9269-454-0443

MID 020906764

September 29, 1982

RECEIVED

Department of Natural Resources
State Office Building
350 Ottawa N.W.
Grand Rapids, Michigan 49503

OCT 01 1982

DISTRICT 3
WATER QUALITY DIV.

Attention: John Bantjes
Water Quality Division

In response to your letter dated September 14, 1982 citing our violations of the requirements of subtitle C of RCRA, the following corrective steps have been taken:

1. Affidavits of personnel training are now on file- Copies attached
2. Danger signs have been posted
3. Inspection Log has been established-sample page attached
4. List of emergency equipment has been included in the contingency plan - Copy attached
5. Operating record has been established-Copy attached
6. Signed copies of the two missing manifests from the TSDF are now in our possession

I hope this meets with your approval and if you have any questions, please do not hesitate to call.

Very truly yours,

James H. Harrison
Branch Manager

GOLD SHIELD SOLVENTS

JHH/sb

X.C. A. Howard (cc)
J. B. Howard



WILLIAM G. MILLIKEN, Governor

DEPARTMENT OF NATURAL RESOURCES

HOWARD A. TANNER, Director

State Office Building

350 Ottawa, N. W.

Grand Rapids, Michigan 49503

September 14, 1982

Dettex Chemical

Mr. James Harrison, Branch Manager
Gold Shield Solvents
312 Ellsworth Ave., S. W.
Grand Rapids, Michigan 49503

Gentlemen:

On September 7, 1982, staff of the Department of Natural Resources conducted an investigation of your facility located at 312 Ellsworth Ave., S. W., in Grand Rapids, Michigan to evaluate compliance of that facility with requirements of subtitle C of the Resource Conservation and Recovery Act (RCRA) as amended. The completed RCRA inspection form is enclosed.

As a result of that investigation, staff of the Department of Natural Resources have determined that the facility is in violation of the requirements of subtitle C of RCRA. Specifically, staff found that:

- 1) Personnel training records are not available as required in 40 CFR 265.16(d), (1), (2), (3) and (4).
- 2) Danger signs are not posted at each entrance as required in 40 CFR 265.14(c).
- 3) An inspection log is not kept as required in 40 CFR 265.15(d).
- 4) A list of emergency equipment at the facility and its location and capability is not included in the contingency plan as required in 40 CFR 265.52(f).
- 5) The operating record does not contain all information required in 40 CFR 265.73(b).
- 6) Exception reports were not submitted as required in 40 CFR 262.42(b).

RECEIVED

SEP 17 1982

ACT 64



Page 2
September 14, 1982
Gold Shield Solvents

We request that you respond to this letter by September 30, 1982, providing documentation to this office regarding those actions taken to correct these violations.

If you have any questions regarding this matter please feel free to contact me at 616-456-6232.

Sincerely,

WATER QUALITY DIVISION



John Bantjes
Water Quality Specialist

JB/mn

Enclosure

cc: Al Howard, OHWM (w/copy of form)
EPA Region V (w/copy of form)
John Bohunsky, Water Quality Division

*870

RCRA Inspection Report

EPA Identification Number: M I D 0 2 0 9 0 6 7 6 4

Installation Name: GOLD SHIELD SOLVENTS

Location Address: 312 ELLSWORTH AVE S.W.

City: GRAND RAPIDS

State: MICHIGAN

Date of inspection: 9-7-82 Time of inspection (from) 1:30 PM (to) 2:45 PM

Person(s) interviewed

Title

Telephone

JAMES HARRISON

BRANCH MANAGER

(616) 454-9269

Inspector(s)

Agency/Title

Telephone

JOHN BANTLES

MDNR

(616) 456-6232

Installation Activity (mark only one box)

Inspection Form(s)

☒ Treatment/Storage/Disposal per 40 CFR 265.1 and ~~266~~
Generation and/or Transportation

A

☐ Treatment/Storage/Disposal (no generation or Transportation)

A

☐ Generation and Transportation

B, C

☐ Generation only

B

☐ Transportation only

C

RECEIVED

SEP 17 1982

ACT 64

INSPECTION FORM A

Section A: SCOPE OF INSPECTION.

1. Interim status standards for treatment storage or disposal of HAZARDOUS WASTES SUBJECT TO 40 CFR 265.1. Complete Inspection Form A sections B, C, D, E, and G.
2. Place an "X" in the box(es) corresponding to the facility's treatment, storage and disposal processes, and generation and/or transportation activity (if any). Complete only the applicable sections and appendixes.

Permit application process(es) (EPA Form 3510-3) Inspection Form A section(s)

S01	<input checked="" type="checkbox"/>	storage in containers	I
S02	<input checked="" type="checkbox"/>	storage in tanks	J
T01	<input type="checkbox"/>	treatment in tanks	J
S04	<input type="checkbox"/>	storage in surface impoundment	K,F
T02	<input type="checkbox"/>	treatment in surface impoundment	K,F
D83	<input type="checkbox"/>	disposal in surface impoundment	K,F
S03	<input type="checkbox"/>	storage in waste pile	L
D81	<input type="checkbox"/>	disposal by land application	M,F
D80	<input type="checkbox"/>	disposal in landfill	N,F
T03	<input type="checkbox"/>	treatment by incineration	O/P
T04	<input checked="" type="checkbox"/>	treatment in devices other than tanks, surface impoundments, or incinerators	Q

Other activities

GENERATOR	<input checked="" type="checkbox"/>	APPENDIX	GN
TRANSPORTER	<input checked="" type="checkbox"/>	APPENDIX	TR

3. Indicate any hazardous waste processes, by process code, which have been omitted from Part A of the facility's permit application.
4. * Indicate any hazardous waste processes (by process code and line number on EPA Form 3510-3 page 1 of 5) which appear to be eligible for exclusion per 40 CFR 265.1(c). Provide a brief rationale for the possible exclusion.

Section B: GENERAL FACILITY STANDARDS: (Part 265 Subpart B)

	YES	NO	NI*	Remarks
1. Has the Regional Administrator been notified regarding: 265.12				
a. Receipt of hazardous waste from a foreign source?	<u> </u>	<u> </u>	<u> ✓ </u>	<u>NONE RECEIVED</u>
b. Facility expansion?	<u> </u>	<u> </u>	<u> ✓ </u>	<u>NONE OCCURRED</u>
c. Change of owner or operator?	<u> </u>	<u> </u>	<u> ✓ </u>	<u>"</u>
2. General Waste Analysis: 265.13				
a. Has the owner or operator obtained a detailed chemical and physical analysis of the waste?	<u> ✓ </u>	<u> </u>	<u> </u>	<u>RECYCLE OPERATION OF KNOWN MATERIAL</u>
b. Does the owner or operator have a detailed waste analysis plan on file at the facility?	<u> </u>	<u> </u>	<u> </u>	<u>NA RECYCLE</u>
c. Does the waste analysis plan specify procedures for inspection and analysis of each movement of hazardous waste from off-site?	<u> </u>	<u> </u>	<u> </u>	<u>NA</u>
3. Security - Do security measures include: (if applicable) 265.14				
a. 24-Hour surveillance?	<u> </u>	<u> ✓ </u>	<u> </u>	<u> </u>
or				
b. i. Artificial or natural barrier around facility?	<u> ✓ </u>	<u> </u>	<u> </u>	<u>BRICKING WALL</u>
and				
ii. Controlled entry?	<u> ✓ </u>	<u> </u>	<u> </u>	<u>LOCKED BUILDINGS</u>
c. Danger sign(s) at entrance?	<u> </u>	<u> ✓ </u>	<u> </u>	<u> </u>
4. Owner or operator inspections: 265.15				
a. Does the owner or operator inspect the facility for malfunctions, deterioration, operator errors, and discharges of hazardous waste that may affect human health or the environment?	<u> ✓ </u>	<u> </u>	<u> </u>	<u> </u>

*Not Inspected

	YES	NO	NI	Remarks
b. Does the owner or operator have an inspection schedule at the facility?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	WEEKLY
c. If so, does the schedule address the inspection of the following items:				
i. monitoring equipment?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	NONE OR SUC
ii. safety and emergency equipment?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iii. security devices?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iv. operating and structural equipment (i.e. dikes, pumps, etc.)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
v. type of problems to be looked for during the inspection (e.g. leaky fitting, defective pump, etc.)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
vi. inspection frequency (based upon the possible deterioration rate of the equipment)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Are areas subject to spills inspected daily when in use?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Does the owner or operator maintain an inspection log or summary of owner or operator inspections?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
f. Does the inspection log contain the following information:				
i. the date and time of the inspection?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
ii. the name of the inspector?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
iii. a notation of the observations made?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
iv. the date and nature of any repairs or remedial actions?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
5. Do personnel training records include: 265.16				
a. Job titles?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PERSONNEL FILE
b. Job descriptions?	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	LEFT IN DETROIT

	YES	NO	NI	Remarks
c. Description of training?			✓	ON THE JOB
d. Records of training?			✓	RECORDS IN DETACH
e. Did facility personnel receive the required training by 5-19-81?			✓	
f. Do new personnel receive required training within six months?			✓	
g. Do personnel training records indicate that personnel have taken part in an annual review of initial training?			✓	
6. If required, are the following special requirements for ignitable, reactive, or incompatible wastes addressed? 265.17				
a. Special handling?				NA
b. No smoking signs?				✓
c. Separation and protection from ignition sources?				✓

Section C: PREPAREDNESS AND PREVENTION: (Part 265 Subpart C)

Maintenance and Operation
of Facility: 265.31

	YES	NO	NI	Remarks
Is there any evidence of fire, explosion, or release of hazardous waste or hazardous waste constituent?		<input checked="" type="checkbox"/>		
2. If required, does the facility have the following equipment: 265.32				
a. Internal communications or alarm systems?	<input checked="" type="checkbox"/>			
b. Telephone or 2-way radios at the scene of operations?	<input checked="" type="checkbox"/>			TELEPHONE
c. Portable fire extinguishers, fire control, spill control equipment and decontamination equipment?	<input checked="" type="checkbox"/>			

Indicate the volume of water and/or foam available for fire control:

UNLIMITED MUNICIPAL WATER SUPPLY

3. Testing and Maintenance of Emergency Equipment: 265.33				
a. Has the owner or operator established testing and maintenance procedures for emergency equipment?	<input checked="" type="checkbox"/>			OUTSIDE SCOURING LOG
b. Is emergency equipment maintained in operable condition?	<input checked="" type="checkbox"/>			
4. Has owner or operator provided immediate access to internal alarms? (if needed) 265.34	<input checked="" type="checkbox"/>			
5. Is there adequate aisle space for unobstructed movement?	<input checked="" type="checkbox"/>			
6. Has the owner or operator attempted to make arrangements with local authorities in case of an emergency at the facility?	<input checked="" type="checkbox"/>			

Section D: CONTINGENCY PLAN AND EMERGENCY PROCEDURES: (Part 265 Subpart D)

	YES	NO	NI	Remarks
Does the Contingency Plan contain the following information: 265.52				
a. The actions facility personnel must take to comply with §265.51 and 265.56 in response to fires, explosions, or any unplanned release of hazardous waste? (If the owner has a Spill Prevention, Control, and Counter-measures (SPCC) Plan, he needs only to amend that plan to incorporate hazardous waste management provisions that are sufficient to comply with the requirements of this Part (as applicable.)	✓			
b. Arrangements agreed by local police departments, fire departments hospitals, contractors, and State and local emergency response teams to coordinate emergency services pursuant to §265.37?	✓			FIRE DEPT
c. Names, addresses, and phone numbers (office and home) of all persons qualified to act as emergency coordinators?	✓			
d. A list of all emergency equipment at the facility which includes the location and physical description of each item on the list and a brief outline of its capabilities?		✓		
e. An evacuation plan for facility personnel where there is a possibility that evacuation could be necessary? (This plan must describe signal(s) to be used to begin evacuation, evacuation routes, and alternate evacuation routes?)			✓	
2. Are copies of the Contingency Plan available at the site and local emergency organizations? 265.53	✓			AT SITE

	YES	NO	NI	Remarks
Emergency Coordinator 265.55				
a. Is the facility Emergency Coordinator identified?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Is coordinator familiar with all aspects of site operation and emergency procedures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Does the Emergency Coordinator have the authority to carry out the Contingency Plan?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Emergency Procedures 265.56				
If an emergency situation has occurred at this facility, has the Emergency Coordinator followed the emergency procedures listed in 265.56?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>Nil none occurred</u>

Section E: MANIFEST SYSTEM, RECORDKEEPING, AND REPORTING: (Part 265 Subpart E)

YES NO NI Remarks

** 1. Use of Manifest System 265.71

a. Does the facility follow the procedures listed in §265.71 for processing each manifest? (Particularly sending a copy of the signed manifest back to the generator within 30 days after delivery.)

✓

b. Are records of past shipments retained for 3 years?

✓

** 2. Does the owner or operator meet requirements regarding manifest discrepancies? 265.72

✓

** Not applicable to owners or operators of on-site facilities that do not receive any waste from off-site sources.

3. Operating Record 265.73

a. Does the owner or operator maintain an operating record as required in 265.73?

✓

b. Does the operating record contain the following information:

i. The method(s) and date(s) of each waste's treatment, storage, or disposal as required in 40 CFR Part 265 Appendix I?

✓

ii. The location and quantity of each hazardous waste within the facility? (This information should be cross-referenced to specific manifest number, if waste was accompanied by a manifest.)

✓

***iii. A map or diagram of each cell or disposal area

*** only applies to disposal facilities

YES NO

Remarks

showing the location and quantity of each hazardous waste? (This information should be cross-referenced to specific manifest number, if waste was accompanied by a manifest.)

iv. Records and results of all waste analyses, trial tests, monitoring data, and operator inspections?

v. Reports detailing all incidents that required implementation of the Contingency Plan?

vi. All closure and post closure costs as applicable?

4. Availability of Records 265.74

Are all facility records required under 40 CFR Part 265 available for inspection?

4.**Unmanifested Waste Reports 265.76

a. Has the facility accepted any hazardous waste from an off-site generator subject to 40 CFR 262.20 without a manifest or or shipping paper?

b. If "a" is yes, provide the identity of the source of the waste and a description of the quantity, type, and date received for each unmanifested hazardous waste shipment.

** Not applicable to owners or operators of on-site facilities that do not receive any hazardous from off-site sources.

Section G - CLOSURE AND POST CLOSURE (Part

Subpart G)

	YES	NO	NI	Remarks
1. Closure 265.112				
a. Is the facility closure plan available for inspection?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Does the plan identify:				
i. maximum extent unclosed during facility life?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NA
ii. maximum hazardous waste inventory?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iv. estimated year of closure?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NOT FORCLOSURE
v. schedule of closure activities?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Has closure begun?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
*2. Post-Closure 265.118				
a. Is the post-closure plan available for inspection?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NA
b. Does this plan contain:				
i. description of groundwater monitoring activities and frequencies?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ii. description of maintenance activities and frequencies for				
AA. integrity of cap, final cover, or containment structures, where applicable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
BB. facility monitoring equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
iii. name, address, and phone number of person or office to contact during post-closure care period?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Has the post-closure period begun?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Is the written post-closure cost estimate available? 265.144	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*A lies only to disposal facilities.

Section I - USE AND MANGEMENT OF CONTAINERS (Part 265, Subpart I)

	YES	NO	NI	Remarks
1. Are containers in good condition? 265.171	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are containers compatible with waste in them? 265.172	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Are containers managed to prevent leaks? 265.173	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are containers stored closed?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Are containers inspected weekly for leaks and defects.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Are ignitable and reactive wastes stored at least 15 meters (50 feet) from the facility property line? (Indicate if waste is ignitable or reactive). 265.176	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>N/A - NO FLAMMABLES.</u>
7. Are incompatible wastes stored in separate containers? (If not, the provisions of 40 CFR 265.17(b) apply). 265.177	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>N/A ONE TYPE WASTE</u>
8. Are containers of incompatible waste separated or protected from each other by physical barriers or sufficient distance?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>N/A ONE TYPE WASTE</u>

Section J - TANKS (Part 265, Subpart J)

YES NO NI Remarks

1. Are tanks used to store only those wastes which will not cause corrosion, leakage or premature failure of the tank? 265.192
☒ ☐ ☐ _____
2. Do uncovered tanks have at least 60 cm (2 feet) of free-board, or dikes or other containment structures?
☒ ☐ ☐ _____
3. Do continuous feed systems have a waste-feed cutoff?
☐ ☐ ☐ NA March 1991
4. Are waste analyses done before the tanks are used to store a substantially different waste than before? 265.193
☐ ☐ ☐ NA one type waste
5. Are required daily and weekly inspections done? 265.194
☒ ☐ ☐ _____
6. Are reactive & ignitable wastes in tanks protected or rendered non-reactive or non-ignitable? 265.198
 Indicate if waste is ignitable or reactive. (If waste is rendered non-reactive or non-ignitable, see treatment requirements.)
☐ ☐ ☐ NA
7. Are incompatible wastes stored in separate tanks? 265.199
 (If not, the provisions of 40 CFR 265.17(b) apply.)
☐ ☐ ☐ NA
8. Has the owner or operator observed the National Fire Protection Associations buffer zone requirements for tanks containing ignitable or reactive wastes?

Tank capacity: _____ gallons

Tank diameter: _____ feet

Distance of tank from property line _____ feet

(See table 2 - 1 through 2 - 6 of NFPA's "Flammable and Combustible Liquids Code - 1977" to determine compliance.)

Section Q - CHEMICAL, PHYSICAL AND BIOLOGICAL TREATMENT (Part 265, Subpart Q)

	YES	NO	NI	Remarks
1. Is equipment used to treat only those wastes which will not cause leakage, corrosion, or premature failure? 265.401	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Is a continuously fed system equipped with a means of hazardous waste inflow stoppage or control (e.g., cut-off system)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>NA. BATCH FEED</u>
3. Has the owner or operator addressed the waste analysis requirements of 265.402?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Are inspection procedures followed according to 265.403?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Are the special requirements fulfilled for ignitable or reactive wastes? 265.405	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<u>NA</u>
6. Are incompatible wastes treated? (If yes, 265.17(b) applies.) 265.406	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>RECYCLE TWO CALORIMETER SLOTTED</u>

Note: EPA has temporarily suspended the applicability of the requirements of the hazardous waste regulations in 40 CFR Parts 122, 264 and 265 to owners and operators of (1) wastewater treatment tanks that receive, store, and treat wastewaters that are hazardous waste or that generate, store or treat a wastewater treatment sludge which is a hazardous waste where such wastewaters are subject to regulation under Sections 402 or 307(b) of the Clean Water Act (33 U.S.C. 1251 et seq.) and (2) neutralization tanks, transport vehicles, vessels, or containers which neutralize wastes which are hazardous only because they exhibit the corrosivity characteristics under 40 CFR §261.22, or are listed as hazardous wastes in Subpart D of 40 CFR Part 261 only for this reason.

Section A: Scope

1. Complete this Appendix if the owner or operator of a TSD facility also generates hazardous waste that is subsequently shipped off-site for treatment, storage, or disposal.

Section B: MANIFEST REQUIREMENTS (Part 262, Subpart B)

	YES	NO	NI	Remarks
(1) Does the operator have copies of the manifest available for review? 262.40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(2) Examine manifests for shipments in past 6 months. Indicate approximate number of manifested shipments during that period. <u>12</u>				
(3) Do the manifest forms examined contain the following information: (If possible, make copies of, or record information from, manifest(s) that do not contain the critical elements). 262.21				
a. Manifest document number?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Name, mailing address, telephone number, and EPA ID number of Generator	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Name and EPA ID Number of Transporter(s)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Name, address, and EPA ID Number Designated permitted facility and alternate facility?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. The description of the waste(s) (DOT shipping name, DOT hazard class, DOT identification number)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. The total quantity of waste(s) and the type and number of containers loaded?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
g. Required certification?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
h. Required signatures?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
(4) Reportable exceptions 262.42				
a. For manifests examined in (2) (except for shipments within the last 35 days), enter the number of manifests for which the generator has <u>NOT</u> received a signed copy from the designated facility within 35 days of the date of shipment. <u>2</u>				
b. For manifests indicated in (4a), enter the number for which the generator has submitted exception reports (40 CFR 262.42) to the Regional Administrator. <u>0</u>				

Section C: PRE-TRANSPORT REQUIREMENTS (Part 262, Subpart C)

	YES	NO	NI	Remarks
1. Is waste packaged in accordance with DOT regulations? (Required prior to movement of hazardous waste off-site) 262.30	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Are waste packages marked and labeled in accordance with DOT regulations concerning hazardous waste materials? (Required for movement of hazardous waste off-site) 262.31 262.32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. If required, are placards available to transporters of hazardous waste? 262.33	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. On-site accumulation of generated hazardous wastes. A HWMF may accumulate hazardous waste it generates either (A) in its storage facility [265.1(b)] or (B) in accordance with 40 CFR 262.34 [see 265.1(c)(7)]. Option B restricts all accumulation to tanks and containers. If the installation elects option A, check this box <input checked="" type="checkbox"/> and skip to Section D. If the installation elects option B, complete the following observations: See 40 CFR 262.34 January 11, 1982 Revision				
a. Is each container clearly marked with the start of accumulation date?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Have more than 90 days elapsed since the date inspected in (a)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Do wastes remain in accumulation tanks for more than 90 days?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Is each container and tank labeled or marked clearly with the words "Hazardous Waste"?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section D: - RECORDKEEPING AND REPORTING (Part 262, Subpart D)

	YES	NO	NI	Remarks
1. Are all test results and analyses needed for hazardous waste determinations retained for at least three years? 262.40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Section E: - INTERNATIONAL SHIPMENTS (Part 262, Subpart E)

1. Has the installation imported or exported Hazardous Waste? 262.50	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
(If answered Yes, complete the following as applicable.)				
a. Exporting Hazardous waste; has a generator:				

	YES	NO	NI	Remarks
i. Notified the Administrator in writing?				
ii. Obtained the signature of the foreign consignee confirming delivery of the waste(s) in the foreign country?				
iii. Met the Manifest requirements?				
b. Importing Hazardous Waste; has the generator met the manifest requirements?				

Appendix TR

Section A: SCOPE:

1. Complete this Appendix if the owner or operator transports hazardous waste subject to 40 CFR 263.10.
2. Does the transporter transport hazardous waste into the U.S. from abroad?
3. Does the transporter transport hazardous waste out from the U.S.?
4. Does the transporter mix hazardous waste of different DOT shipping descriptions by placing them into a single container?

YES NO NI Remarks

✓			
	✓		
	✓		

Section B: MANIFEST SYSTEM AND RECORDKEEPING (Part 263, Subpart B)

1. Are copies of completed manifests available for review and retained for three years. 263.22
2. Estimate the number of manifests for shipments completed during the past 6 months.
3. Examine a representative number of manifests. Indicate number examined.
4. Did transporter properly sign and date the manifests examined?
5. Do any manifests indicate shipments delivered to other than the designated facility? 263.21
If (5) is "no," skip 6 and 7.
6. Do any manifests indicate shipments delivered to other than an alternate facility?
7. Are shipments delivered to alternate facilities only because emergency prevents delivery to the designated facility?

✓			
60			
17			
✓			

Remarks:

GOLD SHIELD SOLVENTS IS A VENDOR OF
CHLORINATED SOLVENTS FOR INDUSTRIAL USE.

GOLD SHIELD SOLVENTS PROVIDES RECYCLING OF THE
SOLVENTS AS A CUSTOMER SERVICE.

THE CONTAMINATED SOLVENTS ARE MANAGED AS A HAZARDOUS
WASTE BY THE CUSTOMERS. CONTAMINANTS ARE REMOVED
BY DISTILLATION. THE RECLAIMED SOLVENT IS RETURNED
TO THE CUSTOMER AND THE REMOVED CONTAMINANTS
(GREASE AND OIL) ARE MANAGED AS A HAZARDOUS WASTE
BY GOLD SHIELD SOLVENTS. EARLIER THIS RESIDUE WAS
NOT CONSIDERED A HAZARDOUS WASTE AND WAS RECYCLED
AS A BOILER FUEL. THIS PRACTICE HAS CEASED.